



Dr. ARAVINDH



BILLING CARD

Patient Name Srisamanna naidu.

D.O.A. 25-4-24 Time 11.30 AM

IP No. IPM 2024000323

Room No. 114

Rent Per Day 4000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
25/4/24	1pm	ER	1st floor (114)	Kan
26/4/24	12.40pm	1st floor (114)	OT	foray 319A
26/4/24	7.00pm	OT	SW	foray 3169
26/4/24	6.40pm	ICU	3rd - (306)	foray (313)

OPERATION THEA TRE

Date	: 26/4/24	OT No.	: OT-1
Surgeon	: DR. ARAVIND	Start Time	: 4.00pm
I Asst. Surgeon	: DR. SURESH	End Time	: 7.00pm.
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	: ULED
Anaesthetist	: DR. MANOHAR	C-Arm	: HORMONIL MACHINE ULED
OT Nurse	: VASANTHA/MAITHILI/LANUAYI	Arthroscopy	:
Name of Surgery	: TOTAL D ₂ GIASTRECTOMY ↓ G ₁₄ ↑ EPIDURAL.	Laprosocopy	: 15 MIN ULED
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	: 1 AMP ULED, FENTANYL PATCH ULED
		Others	: COMPANY CTABLER ULED. ARRANGED BY

MONITOR

INFUSION PUMP DR. ARAVIND

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
26/4/24	7.10pm	28/4/24	6.40pm	27/4/24	7.30AM	27/4/24	3pm
28/4/24	7.00pm	30/4/24	3PM	29/4/24	3PM	30/4/24	3PM
30/4/24	3.30pm						

OXYGEN

TNTG SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
26/4/24	8pm	28/4/24	11.30am	26/4/24	8pm	26/4/24	11pm
28/4/24	8pm	30/4/24	3PM	27/4/24	1AM	27/4/24	4.15AM
				27/4/24	9am	27/4/24	4pm
				28/4/24	5 AM	28/4/24	1pm

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
26/4/24	7.20pm	28/4/24	7.40pm				
28/4/24	8pm	30/4/24	5pm				

OPERATION THEA TRE

Date	OT. No.
Surgeon	Start Time
I Asst. Surgeon	End Time
II Asst. Surgeon	Dis. Pack
III Asst. Surgeon	Diathermy
Anaesthetist	C-Arm
OT Nurse	Arthroscopy
Name of Surgery	Laproscopy
	Sevoflurane / Isoflurane
	Inj. Fentanyl
	Others

LABORATORY

25/04/24	CBC, RFT, PT INR, APTT (2845) Serology Elisa (2846)
26/04/24	Blood grouping typing (2848) T3, T4, TSH (Free) (2846)
26/4/24	Specimen Send to main medway Hospital
	1. Peritoneum. 2. Proximal Donut 3. Distal Donut 4. Main D2 Gastrectomy. (2910)
27/4/24	CBC, RFT, LFT, PT INR (2904)
27/4/24	CBC, RFT (2944)
28/4/24	HB (2978)
30/4/24	Blood cl (3011)
1/5/24	Urinalis (3017)
1/5/24	CBC, RFT, Sr. Albumin (3019) (3020)
2/5/24	CBC, RFT (3040)
3/5/24	CBC, RFT, (3080)
3/5/24	IHC 2 Markers, MSI Panel FHC (3074)
4/5/24	CBC, RFT, CA 19-9, (3084)
	Sr. Albumin (3033)
5/5/24	CBC, RFT, Albumin (3134)
6/5/24	Urine RFT (3139) Dengue Agm Nsi Elisa (3140) MPCR CBC, RFT (3140)

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER

25/04/24	ECG (2855) X		
27/4/24	Xray Chest (2905) ✓		
29/4/24	Chest X-Ray Bedside (2945) ✓		
2/5/24	ORAC GASTRO GRAFFIN DONE IN (GOLDENSCAN) CT ABDOMEN & PELVIS STUDY (3054) PLAIN AND CONTRAST		

GBG		CBG	
25/4/24	1 (2856) ✓		
26/4/24	1+ (2865) + 1 (2882) ✓	5/5/24	1+ (3126) + 1 (3138) ✓
27/4/24	6+ (2906) + 2 (2914) ✓		
28/4/24	3 (2935) + 1 (2935) + 2 (2946) ✓		
29/4/24	1+ (2946) + 3 (2979) ✓	6/5/24	1 (3141) + 2 (3060) ✓
30/4/24	1 (2979) + 2 (3041) ✓		
1/5/24	2+ (3041) + 2 (3041) ✓		
2/5/24	1+ (3041) + 1 (3052) ✓ (3055)		
3/5/24	1+ (3066) + 1 (3081) + 1 (3091) ✓		
4/5/24	1+ (3091) + 2 (3012) + 1 (3012) ✓		

Date

PHYSIOTHERAPY

Rs. 700/- Per Visit.

27/4/24	11:30AM / 6:00PM
28/4/24	9AM
29/4/24	11:30AM / 6:00PM
30/4/24	12:00PM / 6:00PM
1/5/24	10:20AM / 6:00PM
2/5/24	6:00PM
4/5/24	12:00PM / 6:00PM
5/5/24	10:00AM
6/5/24	12:30PM / 6:00PM

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NEBULIZER		NEBULIZER	
26/4/24	①		
27/4/24	①		
28/4/24	② + ① + ②		
29/4/24	1+ 3+		
30/4/24	1+ 1		

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CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Kauthik Sabapathi (Cardiologist)	25/4/24	X					
Dr. Narokan (Anesthetist)	25/4/24						
Dr. Aravind	25/4/24	26/4/24	27/4/24	28/4/24	28/4/24	29/4/24	30/4/24
Dr. Aravind	1/5/24	2/5/24	3/5/24	4/5/24	5/5/24	6/5/24	
Dr. Sujayak	26/4/24	X					
Dr. Vaishnavi (O)	26/4/24	27/4/24	28/4/24	29/4/24	30/4/24	1/5/24	2/5/24
	3/5/24	4/5/24	6/5/24				
Dr. Senthil Kumar (Medical oncologist)	5/5/24	/					
(Cardio) DR. SURENDER	6/5/24	/					
(Pulmo) DR. ELAKIA	6/5/24	/					
DR. KOWSHIK (Neuro)	6/5/24	/					
Ms. Catherine (Dietitian)	29/4/24	/					

PHARMACY

OT DRUGS REPLACED :
BILL CLEARED :
RETURNS CHECKED :

AMBULANCE

Other Procedures : (specify) :-

OT Clearance 

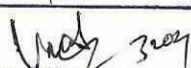
fentanyl patch 25mcg on 26/4/24 in (OT)
Catheterization done in OT @ 1.30pm. 26/4/24

Inj. Fentanyl 100mcg used in ICU (28/4/24)

Ryles tube done in OT (26/4/24)

3 unit PRBC & 1 unit FFP reservation done on 26/4/24

30/4/24 Small Dosing Done by Dr. Aravind

Admission Officer : 

Sister In-charge 

**BILLING CARD****Mr.SRIRAMULU NAIDU G**

74/ Male/ MHM202404460

25/04/2024/ IPM2024000323

Patient Name

D.O.A. _____ Time _____

IP No. _____

Dr.ARAVINDH

Room No. _____

Rent Per Day _____

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		Inj. Fentanyl	:
		Others	:

MONITOR**INFUSION PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OXYGEN**SYRINGE PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP**VENTILATOR**

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Name of Surgery :	Laproscopey :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

[illegible]**CBG**

715124	2	(3168)
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PHYSIOTHERAPY

NEBULIZER

[illegible]