

Ref. Dr. G. Granadeh

Discharge on 12/5/24
CM SCHEME

CABG
MHI/DP/2022/104



Mr. NAGARAJAN S/CM SCHEME
48/Male/MHI202483466
06/05/2024/IPH2024001098
Dr. RAJESH.V

97500/-



Patient Name _____
IP No. _____
Room No. _____

D.O.A. 06/5/24 Time 11:43 AM

FER DETAILS

Rent Per Day GIN

Date	Time	From	To	Nurse's Signature
6/5/24	12:00	ADMISSION	2nd floor Gw-2	E. Calp 207
7/5/24	9:00	2nd floor Gw-2	OT	Deepa
7/5/24	13:25	OT	SICU	Deepa
8/5/24	11:50	SICU	2nd floor (208)	D. S. 208
9/5/24	11:00	SDICU		

OPERATION THEATRE

Date	: 7/5/24	OT No.	: T
Surgeon	: DR. ANBARASU / Dr. Rajesh	Start Time	: 9:15
I Asst. Surgeon	: -	End Time	: 13:25
II Asst. Surgeon	: -	Dis. Pack	: -
III Asst. Surgeon	: PA KARTHIKA	Diathermy	: USED
Anaesthetist	: DR. PRAVEEN	C-Arm	: -
OT Nurse	: SASI DEVIKALA / PADITHA	Arthroscopy	: -
Name of Surgery	: OPEN (CLOSED HEART) / C.A	Laproscope	: -
MAN MAN SAW DRILLING USED & ETO THINGS Rs 1000/- TO BE CHARGED		Sevoflurane / Isoflurane	: 3 HRS 15 MIN
		Inj. Fentanyl	: 2ml 10ml/inj. morphine: -
		Others	: -

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
7/5/24	13:30	8/5/24	20 11:00				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
7/5/24	13:30	8/5/24	5:00	7/5/24	13:30	8/5/24	8:00

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEATRE	
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 :

[illegible]

[illegible]

NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS
7/5/24	1+1						
8/5/24	1+1+1+1						
9/5/24	1+1+1+1						
10/5/24	1+1+1+1						

NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS
7/5/24	1+1						
8/5/24	1+1+1+1						
9/5/24	1+1+1+1						
10/5/24	1+1+1+1						

