Ref - Arun Priya (Hospital mayabdhari

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Jamuna	17/4/24 ICU	18/4/24 IW	19/4/24 ICU				
DR. Praveen	17/4/24 IW	19/4/24 W	20/4/24 W	21/4/24 W	22/4/24 W		
DR. Vignesharan	17/4/24 ICU IW	18/4/24 IW	22/4/24 W				
Dr. Senthil Kumar	17/4/24 IW	18/4/24 IW					
Dr. Asha Valentine	18/4/24 IW						
Dr. Panchandran	18/4/24 IW						
Dr. Arun (psychiatrist)		19/4/24 W					

PHARMACY	AMBULANCE
OT DRUGS REPLACED : TN, NL 80886/-	
BILL CLEARED : TOTAL - ~~18452~~/-	
RETURNS CHECKED : No due/-	

Other Procedures : (specify) :-

17/4/24 Catheterization done by casualty Dr. Sarala. (ICU)

17/4/24 Ryle's tube inserted by. Casualty Dr.

Verified by
L. Nithya 2225
22/4/24 at 8.30pm
22/4/24 at 2pm

R. Kennith
Admission Officer :

Sister In-charge

MH/PRINT / 0007 / BILL / FO

BILLING CARD

Patient Name Mr. Elayaraja. K D.O.A 17/4/24 Time 11.20 AM

IP No. 8084000551

Room No. ICU Rent Per Day 4100

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
17/4/24	10.10 am	Casualty	ICU	Sarala
19/4/24	12.25 pm	ICU	3rd Floor	Tofia

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	:

MONITOR				INFUSION PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
17/4/2024	11.25am	19/4/24	12.25pm	→ 2			

OXYGEN				SYRINGE PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
				17/4/24	10pm	18/4/24	6am → 0

ALPHA BED / SCD PUMP				VENTILATOR			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

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	:

Date	LABORATORY
17/4/24	CBC, ~~Urine~~, Sr Electrolytes, ~~Amylase~~, ~~Lipase~~, ~~Urine~~ Complete prothrombin time, ~~ABG~~ (20240123) (OP paid) ~~PT~~
17/4/24	~~CRP~~ (Serology (20240508)) ~~Calcium~~ (20240512)
	Ketone Blood, ~~LFT~~,
18/4/24	~~CBC~~, ~~Electrolytes~~, ~~PT~~, ~~Platelet~~ count (5136) ~~HbA1c~~ (5147) ~~Lipase~~ Serum,
19/4/24	~~Post~~ Electrolytes (5170) Lipase
20/4/24	RFT, Electrolytes. (5225) (5222) ~~HbA1c~~

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER			
17/4/24	ECG - ~~xray chest~~		
	CT - Abdomen, Echo (20240123) Paid		
19/4/24	CT - Brain (20240593)		

CBG			CBG		
17/4/24	CBG - (20240123)	18/4/24			
1pm	(20240508)	1pm		CBG (1) ( )	(13)
6pm	(5136)	7pm	(5244)		
17/4/24 6pm	(5136)			22/4/24	
1pm	(5136)			CBG - (1) ( )	
18/4/24 2am	(5136)	20/4/24			
1pm	(5142)	pre CBG (5240)			(8)
9pm	(5170)				
19/4/24 2am	(5170)				

Date	PHYSIOTHERAPY

NEBULIZER			NEBULIZER		