POF : Jamuna.

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. Praveen	21/4/24	22/4/24					
Dr. Vinothkumar	21/4/24						
Dr. Ramachandran	21/4/24						
Dr.							

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Total : 7333 /-	
BILL CLEARED :	
RETURNS CHECKED : No due	

Other Procedures : (specify) :-

21/4/24 -> Echo screening done by Dr. Ramachandran

verifying by S/N Achanna

Admission Officer : Sister In-charge

MR/ PRINT / 0007 / BILL / FO

BILLING CARD

Patient Name Mr. Paramasivam S. D.O.A 21/4/24 Time 12.30 pm

IP No. 2024000570

Room No. ICU Rent Per Day 4100

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
21/4/24	1.20 pm	Casualty.	ICU	[illegible]
22/4/24	8 pm			

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	:

MONITOR				INFUSION PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
21/4/24	1. pm	22/4/24	12.30pm.				

OXYGEN				SYRINGE PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

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
21/4/24	CBC, RBS, Sr. Electrolytes, RFT, Lipid profile, Drop F (20241052 81)
22/4/24	RBS, Sr. electrolytes, FT3, FT4, TSH, (5292) Drop I (5292)

Lab Verified by K. Yuvashri 22/4/24

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

21/4/24	ECG. (20241052 81)		
22/4/24.	ECG (5293)		
22/4/24	Echo (5319)		

CBG				CBG			
21/4. 8pm	(5293)						
22/4 8am	(5293)						
1pm	(5319)						
CBG.	(5281)						

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			