

**BILLING CARD****INSURANCE**

Patient Name

Mrs. CHRISTIANA M

65/Female/MHM202404599

24/04/2024/IPM2024000317

IP No. \_\_\_\_\_

Dr. VAISHNAVI GANESAN

Room No. \_\_\_\_\_



D.O.A. 24/4/24 Time 9:15 pm

Rent Per Day

4000/-

**TRANSFER DET AILS**

| Date    | Time    | From         | To              | Sister Signature |
|---------|---------|--------------|-----------------|------------------|
| 24/4/24 | 12:50am | ER           | 1st floor (113) | Gesha (3131)     |
| 25/4/24 | 2:30pm  | OT 1st floor | OT              | Geetha 3171      |
| 25/4/24 | 4pm     | OT           | TLU             | 3188             |
| 26/4/24 | 1Am     | TLU          | 3rd floor (309) |                  |

**OPERATION THEA TRE**

|                       |                          |                          |                    |
|-----------------------|--------------------------|--------------------------|--------------------|
| Date                  | : 25/4/24                | OT No.                   | : 04               |
| Surgeon               | :                        | Start Time               | : 3 pm             |
| I Asst. Surgeon       | : DR - ARUN KUMAR        | End Time                 | : 4:30 pm          |
| II Asst. Surgeon      | :                        | Dis. Pack                | :                  |
| III Asst. Surgeon     | :                        | Diathermy                | : used             |
| Anaesthetist          | : DR. Prnivardhan Ramana | E-Arm                    | :                  |
| OT Nurse              | : Vasanthi Sushring      | Arthroscopy              | :                  |
| Name of Surgery       | :                        | Laproscopy               | :                  |
| ↓ Hemip ortho plasty. |                          | Sevoflurane / Isoflurane | :                  |
| ↓ Spinal              |                          | Inj. Fentanyl            | : 1 amp used       |
|                       |                          | Others                   | : Company Implants |

**MONITOR****INFUSION PUMP**

| Date    | Start | Date    | Disconnect | Date | Start | Date | Disconnect |
|---------|-------|---------|------------|------|-------|------|------------|
| 25/4/24 | 4pm.  | 26/4/24 | 1pm        |      |       |      |            |
|         |       |         |            |      |       |      |            |
|         |       |         |            |      |       |      |            |
|         |       |         |            |      |       |      |            |
|         |       |         |            |      |       |      |            |

**OXYGEN****SYRINGE PUMP**

| Date    | Start | Date    | Disconnect | Date | Start | Date | Disconnect |
|---------|-------|---------|------------|------|-------|------|------------|
| 25/4/24 | 9pm.  | 26/4/24 | 7:30AM     |      |       |      |            |
|         |       |         |            |      |       |      |            |
|         |       |         |            |      |       |      |            |
|         |       |         |            |      |       |      |            |
|         |       |         |            |      |       |      |            |

**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                                                                                                                                           |
|---------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| 24/4/24 | CBC / RFT / LFT / CRP / HbA1c (2814)<br>viral markers (2818)<br>-BT / CT / PT/INR / APTT (02819)<br>Blood grouping (02819)<br>PBS (2824) ABCT (2811) |
| 25/4/24 | ABCT (2811)                                                                                                                                          |
| 26/4/24 | CBC / (2873)                                                                                                                                         |
| 27/4/24 | CBC, RFT, LF (2901)                                                                                                                                  |
| 27/4/24 | urine R/S (2909)                                                                                                                                     |
| 27/4/24 | Blood c/s (2911)                                                                                                                                     |
| 28/4/24 | urine c/s (2920)                                                                                                                                     |

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

24/4/24 ECG (2820) ✓  
 24/4/24 Xray Chest (2822) ✓  
 24/4/24 Xray Both hip AP (2823) ✓  
 25/4/24 CT - brain (mini scan) (2824) ✓  
 25/4/24 ECHO done Dr. KATHICK (cardio) (2824) ✓  
 25/4/24 RIGHT hip AP (Redside) (2858) ✓  
 26/4/24 (L) Foot AP. oblique (Redside) (2874) ✓

CBG

CBG

24/4/24 1+ (2821) ✓  
 25/4/24 1+ (2822) 1+ (2872) ✓  
 26/4/24 2 / (2890) 2 / (2895) ✓  
 27/4/24 1 / (2902) + 1 (2912) + 1 (2915) ✓

PHYSIOTHERAPY

100/Perris ✓

Date

26/4/24 10.00AM / 4.30PM - 600/Perris (Ward)  
 27/4/24 11:45AM / 6.00PM  
 28/4/24 8.00PM

NEBULIZER

NEBULIZER

[illegible]

| PHARMACY            | AMBULANCE |
|---------------------|-----------|
| OT DRUGS REPLACED : |           |
| BILL CLEARED :      |           |
| RETURNS CHECKED :   |           |

Other Procedures : (specify) :-

OT Clearance.

CBD done in OT at 3 pm  
CBD removed on 26/4/24 at 4 pm

Admission Officer :

R. R. Liddick  
Sister In-charge