

## Patient Name

MR. Chinnna Thambi

D.O.A. 25/4 10am  
D.O.D. 30/4 4pm

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

61. W

Rent Per Day

| Date    | Time               | From | To   | Sister Signature |
|---------|--------------------|------|------|------------------|
| 25/4    | 10 <sup>am</sup>   | OP   | EMR  | Aarthi           |
|         | 1 <sup>pm</sup>    | EMR  | wald | Elavara          |
| 29/7/20 | 2 <sup>pm</sup>    | wald | lee  | Bharathi         |
|         | 9.40 <sup>pm</sup> | lee  | wald | kano             |

|                     |                            |
|---------------------|----------------------------|
| 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    | Start | Date | Disconnect |
|---------|-------|------|------------|
| 26/4/24 | 11 PM | 27/4 | 6:30am     |
| 29/4/24 | 24 PM | 29/4 | 8:40 PM    |
|         |       |      |            |
|         |       |      |            |

| Date | Start | Date | Disconnect |
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[illegible][illegible]

| Date | Start | Date | Disconnect |
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| Date | Start | Date | Disconnect |
|------|-------|------|------------|
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|      |       |      |            |



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

25/4/24

ECG

Billed

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER



[illegible]

26/4/24. Catherization Done by Bhavani

29/4/24 2unit B<sup>+</sup>ve In EMR  
Packed cell 10<sup>4</sup>  
Time: 2.40pm in time.  
Time 8.40pm out  
Time

**Submission Officer:**