

Self Discharge on 21/5/24
Dr. Gnanavelu

R-NO: 111

Self Discharge on 21/5/24

PCP to LAD

MHI/DP/2022/104



BILLING CARD

NAME ALERT



Patient Name **Mrs. GEETHA S**
75/Female/MHI202483629
28/04/2024/IPH2024001027
IP No. **Dr. G. GNANAVELU**
Room No.

D.O.A. **28/4/24** Time **9.16 PM**

TRANSFER DETAILS

Rent Per Day _____

Date	Time	From	To	Nurse's Signature
28/4/24	22:20	ADMISSION	1st floor	F. GAT 0207
29/4/24	11:45	1st Floor (113)	Cath Lab	M. R. 0225
29/4/24	13:15	Cath Lab	CCU	Dr. 0146
30/4/24	13:50	CCU	1st Floor (111)	Dr. 0146

OPERATION THEATRE

Date	: 29/4/24	OT No.	: Cath Lab - II
Surgeon	: Dr. Gnanavelu	Start Time	: 12:05
I Asst. Surgeon	:	End Time	: 12:50
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: R. N. Panchararnam	Arthroscopy	:
Name of Surgery	: PTCA	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl : 2ml 10ml/inj. monphi:	:
		Others	:

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
29/4/24	13:15	30/4/24	18:50				

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 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]

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER							
23/4/24	ECG (5386)						
30/4/24	ECG - (1) (5410)						
02/05/24	ECG - (1) (5524)						
CBG				ABG		ACT	
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS
28/4/24	T (5443)	28/4/24					
29/4/24	T (5443)						
29/4/24	T (5386)						
30/4/24	T (5410)						
Date	PHYSIOTHERAPY						
NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS

