

Ref.
Dr. Padma

CPT

CAG

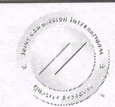
MHI/DP/2022/104



Mrs.UMA DEVI KUGAN (CPT)

BILLING CARD

SAFETY FIRST



Patient Name 63/Female/MHI202483930

D.O.A. 20/5/24 Time 10:10AM

IP No. Dr.K.JAISHANKAR

Room No.

TRANSFER DETAILS

Rent Per Day RL

Date	Time	From	To	Nurse's Signature
20/5/24	10:10	Admission	RL	
20/5/24	11:00	RL	Cathlab	
20/5/24	11:55	CATHLAB	RL	

OPERATION THEATRE

Date	: 20/05/24	OT No.	: CATHLAB II
Surgeon	: Dr. Jaishankar K	Start Time	: 11:20
I Asst. Surgeon	:	End Time	: 11:45
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: R/n. Abinaya	Arthroscopy	:
Name of Surgery	: CAG	Laprosopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl : 2ml 10ml/inj. monphi:	:
		Others	:

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

[illegible]