18 MAY 2024

MH/ PRINT / 0007 / BILL / FO

Mr.RAMAMOORTHY N
60/Male/MHV202403689
16/05/2024/IPV2024000393

Patient Name Dr.K.GAYATHRI MD

IP No.

ILLING CARD

18 MAY 2024

D.O.A. 16/05/24 Time 1.00 pm

Room No. Triple Sharing Non-AC - 302 Rent Per Day 1000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
16/5/24	2Pm	Direct (OP)	Ward (302-A)	S. Gayathri

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

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

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
16/5/24	CBC, Urea, Creatinine, Electrolytes, RBS, Bleeding Time, Clotting Time, HIV I&II, HBsAg, Anti HCV, Blood Grouping & RH Type. (2924)

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER			
14/5/24	ECG, Chest XRay PA (2926)		
17/5/24	USG Abdomen & Pelvis		

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Sowndhrajan MS	at 10 pm 17/5/24						

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	ambulance going to Eniyan Scan centre (1km)
BILL CLEARED :	
RETURNS CHECKED :	

Other Procedures : (specify) :-

Dressing done (small) on 17/5/24 by Dr. Sowndhrajan MS

Admission Officer : S. Mall 16/5/24

S-Consultant
Sister In-charge