

Ref. Dr. Narendran

Self

CAG

MHI/DP/2022/104



BILLING CARD



Mrs. DIANA RACHAL GNANADEI
40/Female/MHI20248+217
05/06/2024/IPH2024001351
Dr. NARENDRA M

SAFETY FIRST

Patient Name

05/06/2024/IPH2024001351

D.O.A. 05/6/24 Time 11:31AM

IP No.

Dr. NARENDRA M

Room No.

TRANSFER DETAILS

Rent Per Day RL

Date	Time	From	To	Nurse's Signature
5/6/24	11:31	F10	RL	[Signature]
5/6/24	14:50	RL	Cath Lab	[Signature]
5/6/24	16:40	Cath Lab	RL	[Signature]

OPERATION THEATRE

Date	: 5/6/24	OT No.	: Cath Lab-8
Surgeon	: Dr. Narendran	Start Time	: 15:05
I Asst. Surgeon	:	End Time	: 16:05
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: RLN. Sathya	Arthroscopy	:
Name of Surgery	: CAG	Laproscopy	:
		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

