Mrs.JAYAKODI
73 Female MHF202421490
20/08/2024 PL2024000250
Dr.PARTHIBAN DURAISAMY

BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name MRS: Jayakodi D.O.A 20/8/24 Time 03:04 Pm

IP No. IPE 2024000250

Room No. 212 Rent Per Day 11150/Day

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
20/8/24	10am.	OP	EMR.	Kokila.
20/8/24	10.10am	EMR	Ward	Jeevitha.
28/08/24	12:30Pm.	Ward	OT	Elavarasi
28/08/24	6Pm	OT	ICU	Kaviya.R
30/8/24.	6.30pm	ICU	ward.	Sreemahe.

OPERATION THEATRE

Date	: 28/08/24	OT No.	: IND
Surgeon	: DR. MOHAN KUMAR	Start Time	: 12:30PM
I Asst. Surgeon	: DR. GOKULA KANNAN	End Time	: 5:30PM.
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	: YES
Anaesthetist	: DR. RAJESHWARAN / RAMYA.	C-Arm	: YES
OT Nurse	: OUTSIDE STAFF (KANNAN)	Arthroscopy	:
Name of Surgery	: IMPLANT EXIT, REVISION DUAL PLATING & BONE GRAFTING.	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	:
		Others	:

MONITOR

Date	Start	Date	Disconnect
28/8/24	6:30pm	30/8/24	6.30 pm

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

To

Mrs.JAYAKODI
73 Female/MHF202421490
20/08/2024 IPL2024006250
Dr PARTHIBAN DURAISAMY

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	:

Date	LABORATORY
20/8/24	FBS, PPBS, HbA1c MMH/MV/DGE20240101b.
21/8/24	FBS, PPBS. RFT, CBC
22/8/24.	FBS, PPBS, Lipid profile.
25/8/24.	Echinococcus IGG
26/8/24.	ESR, CBC, CRP.
27/8/24	PT-INR, APTT, Serology (HIV, HCV HBS AG) Blood grouping And Typing, HB
29/8/24	TC/DC, $S.K^+$, Na^+, Urea, creatinine.

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

21/8/24	ECO
27/8/24	X-ray (1) Thigh (1) Knee AP/LAT
30/8/24	X-ray (1) Thigh (1) Knee AP/LAT

CBG

20/8/24	1
21/8/24	3
22/8/24	2
23/8/24	3
24/8/24	1
28/8/24	1+1+1+1
29/8/24	1+1+1+1
30/8/24	1+1+1
31/8/24	(2)
01/9/24	(3)

CBG

2/9/24	(3)
03/9/24	(1)+(1)+1
04/9/24	(1)

PHYSIOTHERAPY

Date	
2/9/24	(1) - visit.
3/9/24	(2) - visit

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Parthiban	20/8/24 (1)	21/8/24 (1)	22/8/24 (1)	23/8/24 (1)	24/8/24 (1)	25/8/24 (1)	26/8/24
Dr. mohankumar	20/8/24 (1)	21/8/24 (1)	22/8/24 (1)	23/8/24 (1)	24/8/24 (1)	28/8/24 (1) 30/8/24 (1)	29/8/24 (1) 31/8/24
DR. Suganthi	21/8/24 (1) (paid)	21/8/24 (1) (paid)	3/9/24 (1) (paid)	20/8/24 (1)			
Dr. RamSubramanyam + Echo	21/8/24 1500						
Dr. Rahul Pranesh	28/8/24 (1)	29/8/24 (1)	30/8/24 (1)				
Dr. Manikandan	28/8/24 (1)	29/8/24 (1)	30/8/24 (1)				

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED :	
RETURNS CHECKED :	

Other Procedures : (specify) :-

30/8/24 - Dressing Done by (Dr. Mohan Kumar) RW.

D.O.A : 20/8/24.

D.O.D : 4/9/24.

Dr. Mohankumar

Admission Officer :

Sr. Bhuvi.
Sister In-charge

BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name MRS. Jayakodi D.O.A. 20/8/24 Time 03:01 Pm

IP No. IPE2024000250

Room No. 212 Rent Per Day 1400 / Day

TRANSFER DETAILS

Date	Time	From	To	Sister Signature

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	:

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 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	:

Date	LABORATORY

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

CBG

CBG

Date	PHYSIOTHERAPY

dressing	NEBULIZER			NEBULIZER			
2/9/24	①						
4/9/24.	①.						

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Pandhiban	2/9/24 ①	03/9/24 1	03/9/24 1				
Dr. Mohan Kumar	2/9/24 ①	03/9/24 1	4/9/24 ①				

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED :	
RETURNS CHECKED :	

Other Procedures : (specify) :-

D.O.A : 2/8/24.

D.O.D : 4/9/24.

Dr. Neeru DVS

A. Rao.

Admission Officer :

Sister In-charge