

**BILLING CARD**
 Patient Name Moo Ismath Batcho. M D.O.A 23/6/24 Time 22:30 pm

 IP No. 2024000841

 Room No. 214-N

 Rent Per Day 1000/-
TRANSFER DET AILS

Date	Time	From	To	Sister Signature
23/6/24	10:50pm	Casualty	OT	Day 21st.
23/6/24	11:30pm	OT	G/W	P. Soundararaj

OPERATION THEA TRE

Date	<u>23/6/24</u>	OT No.	: <u>11th OT</u>
Surgeon	<u>Dr. Alex moses.</u>	Start Time	: <u>10:50pm</u>
I Asst. Surgeon	: -	End Time	: <u>11:15pm</u>
II Asst. Surgeon	: -	Dis. Pack	: -
III Asst. Surgeon	: -	Diathermy	: -
Anaesthetist	: <u>√ L A</u>	C-Arm	: <u>used 1 shoot</u>
OT Nurse	: <u>P. Soundararaj</u>	Arthroscopy	: -
Name of Surgery	: <u>Rt Shoulder dislocation</u>	Laproscopy	: -
		Sevoflurane / Isoflurane	: -
		Inj. Fentanyl	: -
		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

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 :	Laproscopey :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

LABORATORY

[illegible]

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

24/6/24 X-ray Rt Shoulder)

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]

AMBULANCE

Other Procedures : (specify) :-

Sister In-charge