DOA : 26/6/24 at 2.0Pm

DOD : 26/6/24 at 8.30Pm.

I-FLOOR G/ward

Mrs.PREMAVATHY
47/Female/MHC202467631
27/06/2024/IPC202400176
Dr.VINODHINI.S

BILLING CARD

Pati CASH D.O.A. 26/6/24 Time 2:00pm

IP No. _____

Room No. _____ Rent Per Day 1500/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 27/6/24	OT No.	: II
Surgeon	: Dr. Vinodhini	Start Time	: 4.30 Pm
I Asst. Surgeon	: -	End Time	: 5.00 Pm
II Asst. Surgeon	: -	Dis. Pack	: -
III Asst. Surgeon	: -	Diathermy	: -
Anaesthetist	: Dr. Arthi	C-Arm	: -
OT Nurse	: Srimathi	Arthroscopy	: -
Name of Surgery	: F/C	Laproscopy	: -
		Sevoflurane / Isoflurane	: -
		Inj. Fentanyl	: 2ml 10ml/Inj. Morphine (1) amp
		Others	: HPF-1 — (1) Inj. Ketamine 2ml

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED

Date	Start	Date	Disconnect

SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Chenni (MD)	27/6/24						

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Pt advaya BILL CLEARED : RETURNS CHECKED :	nil

CROSS MATCHING :

RESERVATION OF BLOOD :

STERILE TRAY USED : nil

TRANFUSION (BLOOD)

ATTENDER'S HOLDING :

OTHER PROCDURES :

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
27/6/24	BT. CT. - 2408107
27/6/24	HPE - (1) — 2024 08109

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

CBG

DATE	NUMBERS	DATE	NUMBERS
24/6/24	1-8116		

ABG

DATE	NUMBERS	DATE	NUMBERS

ACT

PHYSIOTHERAPY

Date	

NEBULIZER

DATE	NUMBERS	DATE	NUMBERS

OTHERS

DATE	NUMBERS	DATE	NUMBERS