

Ref/ESI



CAG

MHI/DP/2022/104



BILLING CARD



Mr. JOSEPH BALASAMY (ESI)
47/Male/MHI202484564
01/07/2024/1PH2024001545
Dr. G. GNANAVELU

D.O.A. 01/7/24 Time 10:54 AM

Room No. _____ RENT Per Day _____ RL

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature
1/7/24	10:54	Adm	RL	
1/7/24	12:25	RL	Cath lab	
1/7/24	13:25	Cath lab	RL	

OPERATION THEATRE

Date	: 1/7/24	OT No.	: Cath lab 1
Surgeon	: Dr. Gnanavelu	Start Time	: 12:35
I Asst. Surgeon	:	End Time	: 13:10
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: R/A. Priya	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

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