INSURANCE

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

Mr.MOORTHY G
2/Male/MHM202405531
04/07 2024 IPM2024000538
Dr.BALAMURUGAN.S

Patient Name

IP No. _____

Room No. 307

D.O.A. 04/7/24 Time 6.40pm

Rent Per Day ₹500/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
4/7/24	8pm	ER	3rd floor	Sandhiya 3189
5/7/24	8.14	3rd floor	OT	Sandhiya 3189
5/7/24	10.00AM	OT	3rd Floor.	Shanthi 3169

OPERATION THEA TRE

Date	: 5/7/24	OT No.	: OT-1
Surgeon	: DR. BALAMURUGAN	Start Time	: 8.30AM
I Asst. Surgeon	:	End Time	: 9.30AM
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	: DR. SENTHIL KUMAR	C-Arm	:
OT Nurse	: VASANTHA	Arthroscopy	:
Name of Surgery	: LAPROSCOPIC RELEASE CONGENETAL ADHESION.	Laproscopy	: LAP UNIT USED
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	: 1 AMP USED.
		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 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	:	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	:
		Others	:

Date	LABORATORY
4/8/24	Blood Grouping & typing (4638)

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

CBG

14/9/24	(46-74)		
15/9/24	2(46-74)		

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Balamurugan	2/7/24	5/7/24	6/7/24				

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

Other Procedures : (specify) :- OT clearance done 30/7/22.

Admission Officer:

Sister In-charge