

Mrs. POONGODI

56/Female/MHC202468497

08/07/2024/IPC2024001860

Dr. MALINI



BILLING CARD

NON A/C Room (T)

Patient Name Mrs. poon/codi 50/P

D.O.A. 8/7/24 Time 7.00pm

IP No. 1860

Room No. 7

Rent Per Day 1850

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 09/07/2024	OT No.	: 01-11
Surgeon	: Dr. Malini	Start Time	: 8.30 am
I Asst. Surgeon	: Dr. Sasibala	End Time	: 9.45 am
II Asst. Surgeon	: -	Dis. Pack	: -
III Asst. Surgeon	: -	Diathermy	: -
Anaesthetist	: Dr. Ravikumar	C-Arm	: -
OT Nurse	: Ragina, Yaga	Arthroscopy	: -
Name of Surgery	: TAH	Laprosopy	: -
		Sevoflurane / Isoflurane	: -
		Inj. Fentanyl	: 2ml 10ml/Inj. Morphine
		Others	: Biopsy medium - (1)

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 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 :

[illegible]

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

CBG				ABG		ACT	
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS
9/7/24	① 2024	0861A					
10/7/24	① 2024	08544					
11/7/24	① + ① ?						
12/7/24	①	2024 08613					

Date	PHYSIOTHERAPY						

NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS
9/7/24	①						