BILLING CARD

Patient Name Mr. Ranganathan D.O.A 23/7/24 Time 6.30pm

IP No. 2024000020l.

Room No. ICU to 9.23. Rent Per Day 3500/Day.

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
23/7/24	7.00 Pm	EMR	ICU.	Kv. Jayalakshmi
23/7/24.	7:30pm.	ICU	OT.	Sowmaha.
23/7/24.	8:30pm.	OT	ICU	
24/7/24.	11.40Am	ICU	ward.	

OPERATION THEA TRE

Date	: 23/7/24	OT No.	: II OT
Surgeon	: DR Parthiban	Start Time	: 7.45 PM
I Asst. Surgeon	:	End Time	: 8-15 PM
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	: ✓
Anaesthetist	: DR. Mayilvanan	C-Arm	:
OT Nurse	: Jamunarani	Arthroscopy	:
Name of Surgery	: Luxation Forehead sturing	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	:
		Others	:

MONITOR

Date	Start	Date	Disconnect
23/7/24.	8:30pm.	24/7/24.	11:20AM.

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
22/2/24	RFT, ELECTROLYTES, CBC

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

23/2/24	CT- BRAIN, CT FACIAL BONE PLAIN		
24/2/24	CHEST X-ray		

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. parthiban Durairasany	23/7/24 (1)	24/7/24 (1)	25/7/24 (1)				
Dr. Manikandan [Intensivist]	23/7/24 (1)						
Dr. Rahul [Intensivist]	23/7/24 (1)						

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

Other Procedures : (specify) :-

1. Stay Stable & Discharge done at Emergency

D.O.A : 23/7/24

D.O.D : 25/7/24.

Admission Officer

N 8

Sister In-charge