



Baby.MRISHIKA CASSIEL J

0/Female/MHM202405911

24/07/2024/1PM2024000608

Dr.DHANASEKHAR K

Patient Name

IP No.

Room No. 113

NG CARD

MH/ PRINT / 0007 / BILL / FO

D.O.A 24/7/24 Time 11.00 am

Rent Per Day 4000/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
24/07/24	12pm	BP	1 st Floor	J. M. 3222

OPERATION THEATRE

Date :	OT No. :
Surgeon :	Start Time :
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 :

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 THEATRE	
Date :	OT. No. :
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Name of Surgery :	Laproscopy :
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	Inj. Fentanyl :
	Others :

Date	Others
24/7/24	CBC, ERP, RFI (S131)
25/7/24	Blood culture (S132)
	RFI (S163)
	Stool culture (S164)

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

24/7/24 USG Abdomen (5135)

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]