26 JUL 2024

MH/ PRINT / 0007 / BILL / FO

Mrs.J.KALAYARASI
40/Female/M11V202403767
25/07/2024/IPV2024000637
Dr.SOUNDARRAJAN

ILLING CARD

Patient Name

IP No.

26 JUL 2024 D.O.A. 25/07/24 Time 4.20 PM

Room No. Single Room Non AC-313 Rent Per Day 1400 /-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
25/7/24.	4PM	ED	W/ARD	

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	:

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

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

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Gayathri	25/7/24 @ 6pm	26/7/24 @ 10.30 AM					
Dr. Kathiravan (ortho)	25/7/24 @ 6.40pm						
Dr. Soundharrayan.	25/7/24 @ 5.30 pm	26/7/24 @ 12 Noon					

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

Other Procedures : (specify) :-

Admission Officer : S. Malu 25/7/24

Sister In-charge