28 JUL 2024

NG CARD

MH/ PRINT / 0007 / BILL / FO

Mr.PAKALAVAN.M
21/Male/MIIV202403808
27/07/2024/IPV2024000642
Dr.K.GAYATHRI MD

28 JUL 2024

Patient Name _____ D.O.A. 27/7/24 Time 11.50 PM

IP No. _____

Room No. Single Room NON AC-312 Rent Per Day 1400/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
27/7/24	11:50pm	ER.	ward	SIN 0128

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	:

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.	:
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
28/7/24	MP, MF(PS) (4415), Urine R/E (4425)

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER			
28/7/24	Echo screening) 4434)		

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Sunday Date	Date	Date	Date	Date	Date	Date
Dr. Gayathri MD	12.45pm 28/7/24 at 1pm						
DR. Karthikeyan (cardiy)	28/7/24						

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

Other Procedures : (specify) :-

Admission Officer : 27/7/24

Sister In-charge