

Dr. Narendran

Self

CSG

MHI/DP/2022/104



BILLING CARD

SAFETY FIRST



Patient Name Mrs. NASIMUNNISHA AMEERJAN
69/Female/MHI202485045
IP No. 30/07/2024/1P112024001757
Room No. Dr. NARENDRAN M

D.O.A. 30/7/24 Time 10.43 AM

TRANSFER DETAILS Rent Per Day RL

Date	Time	From	To	Nurse's Signature
30/7/24	10:43	Adm	RL	R. 10029
30/7/24	12:47	RL	CATH LAB	R. 100319
30/7/24	13:50	CATH LAB	RL	E0004

OPERATION THEATRE

Date	: 30/07/24	OT No.	: CATH LAB-II
Surgeon	: Dr. Narendran	Start Time	: 13:15
I Asst. Surgeon	:	End Time	: 13:35
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: R/n. Abinaya	Arthroscopy	:
Name of Surgery	: CAV	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl : 2ml 10ml/inj. monphi:	:
		Others	:

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

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