



CAG

MHI/DP/2022/104



Mr. ROBERT'S

64/Male/MHI202485257

Patient Name

14/08/2024/1PH2024001875

IP No.

Dr.G. GNANAVELU

Room No.

**BILLING CARD**
SAFETY FIRST

D.O.A. 14/8/24 Time 10:30 AM

TRANSFER DETAILS

Rent Per Day

RL

Date	Time	From	To	Nurse's Signature
14/8/24	10:58	Adm	RL	Phu #034
14/8/24	11:40	RL	Cath lab.	
14/8/24	14:30	Cath Lab	RL	Piorn

OPERATION THEATRE

Date	: 14/8/24	OT No.	: Cath lab.
Surgeon	: Dr. Gnanavelu	Start Time	: 13:50
I Asst. Surgeon	:	End Time	: 14:10
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: R/N Sandhya	Arthroscopy	:
Name of Surgery	: CAG	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl : 2ml 10ml/inj. morphi:	:
		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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