

RT 10:30 AM 18/8/24



## BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Arun Prasath

Mr. ARUN PRASATH

D.O.A. 17/8/24 Time 1pmIP No. PPM2024000712

40/Male/MHM202406395

17/08/2024/PPM2024000712

Room No. 309

Dr. BALAMURUGAN.S

Rent Per Day 1500

| Date    | Time   | From                       | To                     | Sister Signature |
|---------|--------|----------------------------|------------------------|------------------|
| 17/8/24 | 1.30pm | ER                         | 11 <sup>th</sup> floor | R. Pradishan     |
| 17/8/24 | 4.30pm | 11 <sup>th</sup> floor 309 | OT                     | R. Pradishan     |
| 17/8/24 | 6.05pm | OT                         | 3 <sup>rd</sup> floor  | 3176             |
|         |        |                            |                        |                  |
|         |        |                            |                        |                  |
|         |        |                            |                        |                  |

## OPERATION THEATRE

|                     |                    |                            |         |
|---------------------|--------------------|----------------------------|---------|
| Date :              | 17/8/2024          | OT No. :                   | I       |
| Surgeon :           | Dr. Balamurugan    | Start Time :               | 5.15 pm |
| Asst. Surgeon :     |                    | End Time :                 | 5.45 pm |
| II Asst. Surgeon :  |                    | Dis. Pack :                |         |
| III Asst. Surgeon : |                    | Diathermy :                | Used    |
| Anaesthetist :      | Dr. Senthil Kumar  | C-Arm :                    |         |
| OT Nurse :          | Maithili V         | Arthroscopy :              |         |
| Name of Surgery :   | Fistulectomy under | Laproscopy :               |         |
|                     | spinal Anaesthesia | Sevoflurane / Isoflurane : |         |
|                     |                    | Inj. Fentanyl :            |         |
|                     |                    | 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 |
|------|-------|------|------------|------|-------|------|------------|
|      |       |      |            |      |       |      |            |
|      |       |      |            |      |       |      |            |
|      |       |      |            |      |       |      |            |
|      |       |      |            |      |       |      |            |

| 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 :                   |

## LABORATORY

[illegible]

[illegible]

CBG

| Time | CBG |
|------|-----|
| 0    | 10  |
| 1    | 9   |
| 2    | 8   |
| 3    | 7   |
| 4    | 6   |
| 5    | 5   |
| 6    | 4   |
| 7    | 3   |

**CBG**

| Time | CBG |
|------|-----|
| 0    | 10  |
| 1    | 9   |
| 2    | 8   |
| 3    | 7   |
| 4    | 6   |
| 5    | 5   |
| 6    | 4   |
| 7    | 2   |
| 8    | 2   |
| 9    | 2   |
| 10   | 2   |

[illegible]

PHYSIOTHERAPY

[illegible][illegible]

