



Patient Name

IP No.

Room No.

304-B Twin Sharing non A/C

MH/ PRINT / 0007 / BILL / FO

CARD

23 AUG 2024

D.O.A. 18/08/24 Time 2:00pm

MR. AYYANAR

35/Male/MLIV202404125

18/08/2024/IPV2024000718

Dr. SOUNDARRAJAN



TRANSFER DETAILS

Date	Time	From	To	Sister Signature
18/08/24	2:00pm	ER	Ward 304-B	S/N JHO
18/8/24	10:45pm	Ward	ICU	P. J. D. 0128
21/8/24	10:45 AM	ICU	WARD (313) AC	M. A. S. 0025

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

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
18/8/24	10:50 PM	21/8/24	10:45 AM				

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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