

IInd Floor - Non A/c Single

Mr. RADHA KRISHNAN Medway JSP 42/Male/MIIC202472044 The way to be (A Unit of United Alliance 23/08/2024/IPC2024002290) Patient Name Dr. ARTIII IP No. 26 Room No. _____	BILLING CARD _____an.	D.O.A. 23/8/24 Time 10:23 Am Rent Per Day Rs. 1850.
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TRANSFER DETAILS				
Date	Time	From	To	Nurse's Signature
23/08/24	11:00 Pm	62 non A/c	ICU II	Anitha nathi
24/8/24	8 Am	ICU	56 non Ac	

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 : 2ml 10ml/Inj. Morphine
	Others :

MONITOR				INFUSION PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
23/08/24	11:00 ^{Pm}	24/8/24	8Am				

OXYGEN				SYRINGE PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
23/08/24	11:00 ^{Pm}	24/08/24	6 Am				

ALPHA BED				SCD PUMP		VENTILATOR	
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEATRE

Date :	OT. No. :
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III Asst. Surgeon :	Diathermy :
Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date	LABORATORY
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23 8 24	CBC, FBS, HbA1C, Electrolytes, RFT, - 10517
23 8 24	PPBS ⇒ 0519
23 8 24	LET, Anti° HCV, HIV I & II, VDRL, HBsAg ⇒ 0530
24 08 24	FBS, PS Study, Blood Grouping Typing ⇒ 0542

[illegible]