

MH/ PRINT / 0007 / BILL / FO

Patient Name Child - lakshnapriya

D.O.A. 11/9/24 Time 12:40 P

IP No. 1PKB202400117

Room No. 815

Rent Per Day 1500/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
11/9/24	1:45 pm	Orseverely	Indeflex	P. V. nodding 216

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

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

[illegible]

SYRINGE PUMP

[illegible]

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

[illegible]

OT. No.

Start Time

End Time

Dis. Pack

Diathermy

C-Arm

Arthroscopy

Laparoscopy

Sevoflurane / Isoflurane :

Inj. Fentanyl

Others	1
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LABORATORY

19/04 ppt, s-electrolyte, cfp, cbc (copied)

19/24 Blood Grouping typing (11081)

3/9/24. stool over syst, stool for culture, obitones, (1177)
~~urine culture, urine complete.~~ ()

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER

1/9/24, X-ray chest (OPCB202404561) ~~radiation scan~~
 2/9/24, USG abdomen & pelvis our ambulance (Own paid)

1/9/24 CBG (C op paid) (OPCB202404561)
 2/9/24 CBG (11130)
 (2)

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

Ref :- Dr. Manivannan.

[illegible]

Verified
AOK

PHARMACY

AMBULANCE

OT DRUGS REPLACED : V. Jeyaraj
BILL CLEARED : No due.
RETURNS CHECKED : Tot:- 4088/-

Other Procedures : (specify) :-

4/19/23 9am

Admission Officer :

B. Only.

Sister In-charge