Baby.YUVAN BHAIRAV
0/Male/MHM202406712
03/09/2024/IPM2024000775

NG CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name _ Dr.DHANASEKHAR K

D.O.A. 03/09/24 Time 1.30Pm

IP No. _____

Rent Per Day 2500/-

Room No. 303

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
3/9/24	3PM	ER	3rd Floor (303)	

OPERATION THEATRE

Date :
Surgeon :
I Asst. Surgeon :
II Asst. Surgeon :
III Asst. Surgeon :
Anaesthetist :
OT Nurse :
Name of Surgery :

OT No. :
Start Time :
End Time :
Dis. Pack :
Diathermy :
C-Arm :
Arthroscopy :
Laproscopy :
Sevoflurane / Isoflurane :
Inj. Fentanyl :
Others :

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

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	:

Date	LABORATORY
3/9/24	CBC / URP / Blood Cl (b286)
3/9/24	Urine C/S (b289)

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

CBG

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

4/9/24	3		
5/9/24	1		

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Dhana Lakshmi	3/9/24	4/9/24	4/9/24	5/9/24.			

PHARMACY		AMBULANCE
OT DRUGS REPLACED	: Total Sale: Rs. 720/-	Nil
BILL CLEARED	:	
RETURNS CHECKED	: Time: 19.08 pm. 05/9/24	

Other Procedures : (specify) :-

Admission Officer:

Sister In-charge