

Ref: Dr. Narendran. M,

Self

CAG

MHI/DP/2022/104



BILLING CARD

SAFETY FIRST



Patient Name

Mrs. RADHABAI S

IP No.

77/Female/MHI202485659

Room No.

05/09/2024: IP112024002077

Dr. NARENDRAN M

D.O.A. 05/09/2024 Time 12:27 pm

TRANSFER DETAILS

Rent Per Day

Date	Time	From	To	Nurse's Signature
5/9/24	10:30pm	Admit	ER	Prim
5/9/24	10:20	ER	Cath Lab	Prim
5/9/24	3:54pm	Cath Lab	PC	Prim

OPERATION THEATRE

Date	: 5/9/24	OT No.	: CAG Lab
Surgeon	: Dr. Narendran	Start Time	: 3:20pm
I Asst. Surgeon	:	End Time	: 3:30pm
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: Anusadharini K	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

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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