

Ref: Dr. Gnanavelu

Discharge on 13/9/24 Check CAG
LGH CASH

MHI/DP/2022/104



BILLING CARD



Mr. GANESAN
70/Male/MHI202485683
09/09/2024: 1P112024002098
Dr. G. GNANAVELU

Patient Name _____

IP No. _____

Room No. _____

D.O.A. 09/09/24 Time 04:02 AM

TRANSFER DETAILS

Rent Per Day 205-A

Date	Time	From	To	Nurse's Signature
9/9/24	6.00	ADMISSION	2nd floor 105/B	EC 207
12/9/24	13:30	105B	Cathlab	Hayward
12/9/24	14.20	C3th Lab	1st floor (105-B)	EC 207B

OPERATION THEATRE

Date	: 12/9/24	OT No.	: C9th Lab 5H
Surgeon	: Dr. Gnanavelu	Start Time	: 13.20
I Asst. Surgeon	:	End Time	: 14.05
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: R.N. Panchavarnam	Arthroscopy	:
Name of Surgery	: Check CAG	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl : 2ml 10ml/inj. morphine	:
		Others	:

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
9/9/24	6.10	12/9/24	6.00				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
9/9/24	6.10	12/9/24	6.00				

18hrs

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	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 :

[illegible]

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