

I floor Single Room Non A/c

BILLING CARD

Cash

Patient Name: Mrs. HEMAMALINI
35/Female/MIIC202473716

D.O.A. 13.09.24 Time 05:49 PM

IP No. 13/09/2024/IPC2024002504

Room No. Dr. SASIKALA

Rent Per Day 1850/-



TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date : 14/09/24	OT No. : 01
Surgeon : DR. Sasikala	Start Time : 8:45 am
I Asst. Surgeon : -	End Time : 9:30 am
II Asst. Surgeon : -	Dis. Pack : -
III Asst. Surgeon : -	Diathermy : -
Anaesthetist : DR. Ravi Kumar	C-Arm : -
OT Nurse : Yoga, Kavi	Arthroscopy : -
Name of Surgery : hystro Lap	Laproscopy : -
	Sevoflurane / Isoflurane : used
	Inj. Fentanyl : 2ml 10ml/Inj. Morphine 1 AMP
	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

[illegible]

PHARMACY		AMBULANCE
OT DRUGS REPLACED	: R-Thermiz MJC 138	Nil
BILL CLEARED	:	
RETURNS CHECKED	:	

CROSS MATCHING :

RESERVATION OF BLOOD :

STERILE TRAY USED :

TRANFUSION (BLOOD)

ATTENDER'S HOLDING :

OTHER PROCEDURE :

211

D.O.A: 13/9/2024

D.O.D: 14/9/24

WOC 6pm
Sister In-charge

OPERATION THEATRE	
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Anaesthetist :	C-Arm :
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Name of Surgery :	Laproscopey :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

[illegible]