

B/O.MEENA RANGAN

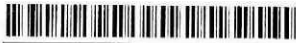
D.Female:MHV202404745

21/09/2024/IPV2024000872

Dr.SASIKALA



Patient Na



IP No.

Room No. SICU- B1

Rent Per Day

3500/-**BILLING CARD****23 SEP 2024**D.O.A. 21/09/24 Time 1.00pm**TRANSFER DET AILS**

Date	Time	From	To	Sister Signature
21/9/24	1.00pm	OT	NICU	Jen 0142
22/9/24	6.15pm	NICU	NURSERY WARD (CRADLE)	M. LITIA (0116)

OPERATION THEA TRE

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**INFUSION PUMP CPAP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
21/9/24	1 pm	22/9/24	6pm	21/9/24	1 pm	21/9/24	6pm

OXYGEN WARMER**SYRINGE PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
21/9/24	1 pm.	22/9/24	6pm.	21/9/24	1 pm	21/9/24	8pm

ALPHA BED / SCD PUMP**VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

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