02 OCT 2024

Mr.MAGIMAI DAS
70/Male MHV202404933
02/10/2024/IPV2024000923
Dr.D.NIVEDHIDHA

ILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient

IP No.

D.O.A. 02/10/24 Time 2:00 AM

Room No. ICU - 31

Rent Per Day 3500

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
02/10/24	2 am	ER	ICU 3	

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	: INJ. MIDAZOLAM (Day 1 Use)

MONITOR

Date	Start	Date	Disconnect
2/10/24	2 AM	2/10/24	6pm.

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
2/10/24	2 AM	2/10/24	6pm.

SYRINGE PUMP

Date	Start	Date	Disconnect
2/10/24	3.30 AM	2/10/24	6pm

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR - C-Pap

Date	Start	Date	Disconnect
2/10/24	2 AM	2/10/24	10 am

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
2/10/24	CBC, UREA, CREATININE, Sr. ELECTROLYTES, TROPONIN-T, URINE COMPLETE EXAMINATION [63707], ABG [63712].

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

2/10/24	CHEST X-RAY BEDSIDE [6371]		
	ECHO SCREENING (AADA)	DR. KARTHIKEYAN	CARDIO

CBG

2/10/24	1+1+1+1+1		
	1+1+1+1+1		

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. KARTHIKEYAN (Cardio)	2/10/24 @ 9am						
DR. GAYATHRI M.D	2/10/24 @ 10.30am						

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED :	
RETURNS CHECKED :	

Other Procedures : (specify) :-

CATHETERIZATION DONE IN ICU ON 2/10/24

Admission Officer :

Sister In-charg