

DOB - 9/10/24 9:50 AM II floor
DOD - 9/10/24 9:50 PM Cash

BILLING CARD

Non-Ac-Room

Patient Name

Mr. RAJESH

21/Male MHC202475785

IP No.

09/10/2024/IPC2024002806

Room No.

Dr. VIGNESH S.V.

D.O.A. 9/10/24 Time 9:49 AM

Rent Per Day 1850/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 9/10/24	OT No.	: ①
Surgeon	: DR. VIGNESH	Start Time	: 2.30pm
I Asst. Surgeon	: —	End Time	: 3.00pm
II Asst. Surgeon	: —	Dis. Pack	: —
III Asst. Surgeon	: —	Diathermy	: —
Anaesthetist	: DR. ARTHI	C-Arm	: —
OT Nurse	: SRI MATI	Arthroscopy	: —
Name of Surgery	: (P) CLAVICAL EXCISION	Laproscopy	: —
	BIOPSY	Sevoflurane / Isoflurane	: —
		Inj. Fentanyl : 2ml 10ml/Inj. Morphine	
		Others	: 5. FORTWIN ① 5. KETAMIN

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
9/10/24	4.00pm	9/10/24	5pm

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED

Date	Start	Date	Disconnect

SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

[illegible]

[illegible]

9	10	24
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ECG 3 2017

due

A-17

CBG

ABG

ACT

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

Date _____

PHYSIOTHERAPY

NEBULIZER

OTHERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

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

9/10/24 Anti HCV, HIV I & II, HBsAg (2602)

9/10/24 Pul culture, bronxperd MTB/RIF ⇒ 2615