

Dr. Lakshya

127 cm

58 kg

INSURANCE

Medical Manager

MHI/DP/2022/104



BILLING CARD
SAFETY FIRST



Patient Name

Mr.KUPPUSWAMY

IP No.

70/Male/MHI202374729

Room No.

05/08/2024:IP12024001796

Dr.E.LAKIYA



D.O.A.

05/8/24

Time

11:49 AM

Ward - 3.5

TRANSFER DETAILS

Rent Per Day

Single Room

Date	Time	From	To	Nurse's Signature
5/8/24	12:30	ADMISSION	1ST FLOOR (10th)	Shao 8x

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 : 2ml 10ml/inj. monphi:
	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

OPERATION THEATRE

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	Others :

[illegible]

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RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER							
5/8/24	ECG, X-RAY, ECHO (9903)						
6/8/24	PTA, CT-PNS (9979)						
6/8/24	PFT C DLV (2500/-) (0045)						
CBG				ABG		ACT	
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS
5/8/24	1+1+1						
6/8/24	1+1+1						
7/8/24	1+1+1						
8/8/24	1+1						
Date	PHYSIOTHERAPY						
NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS
5/8/24	1+1						
6/8/24	1+1						
7/8/24	1+1						
8/8/24	1+1						

