BILLING CARD

Patient Name T. Ambika; 25/F D.O.A. 16/4/24 Time 4:20 PM

IP No. 124 Asis:- Vaginal bleeding (PPH)

Room No. Single room Non AC Rent Per Day 3000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
16/4/24	5.00pm	GOAR	101 room	

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

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

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	:

Date	LABORATORY
17/4/24	SURgical profile, TSH, [illegible] marker → paid in op by patient

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

CBG			

CBG			

Date	PHYSIOTHERAPY

NEBULIZER			

NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Kamesveera	16/4/24	17/4/24					

PHARMACY	AMBULANCE
OT DRUGS REPLACED : –	
BILL CLEARED : 231 DUE TOTAL	
RETURNS CHECKED : –	

Other Procedures : (specify) :-

Admission Officer :

J. Rathna NS 82

P. Vardhini (0090)
Sister In-charge