

R.T 10:00 29/11/23

MH/ PRINT / 0007 / BILL / FO



BILLING CARD

Mrs. SUSILA

86/Female/MHM202302526

25/11/2023/IPM2023000972

Dr. SIVAKUMAR D.K.

Patient Name Mrs. SUSILAIP No. IPM2023000972Room No. ICUD.O.A. 25/11/23 Time 11:30pm

Rent Per Day _____

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
26/11/23	2.25Am	ER	ICU	S/N. Thilaga
25/11/22	10:00 PM	ICU	NICU (TWIN STAIRWAY)	3161

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

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
26/11/23	2.25Am	28/11/23	10 am				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
26/11/23	2.30Am	28/11/23	1pm				

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

37 DAYS

25 DAYS

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 :

[illegible]

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

26/11/23	MRI Brain (MRA & MRV)	Graini scan alone (3692)
26/11/23	CXR (3572)	
26/11/23	ECG (3572)	
26/11/23	Echo (3584)	

(H)	CBG	CBG
25/11/23	1 (3573)	
26/11/23	1 (3585) 1 (3646) + 1 (3667)	

Date	PHYSIOTHERAPY	Rs - 700/- per session
26/11/23	2:30pm	
27/11/23	1:10pm / 6:30pm	From here Rs. 600/- per session
28/11/23	11:30am / 6:00pm	

NEBULIZER

NEBULIZER

