



BILLING CARD

Patient Name Mrs. Pabala Visalakshi D.O.A. 04/04/24 Time 3:14 PM
 IP No. 104 DSIS - LSCS.
 Room No. 202 AC Rent Per Day 4000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
1/4/24	3:30pm	ENR	112 room	P. Sandhya
5/4/24	6 AM	112 room	OT 1	Mani
5/4/24	8 PM	OT	SICU	Kumari
5/4/24	7:40pm	SICU	112 room	A. Uma

OPERATION THEA TRE

Date	: 5/4/24	OT No.	: I.
Surgeon	: Dr. Himabindu	Start Time	: 6:45 AM
I Asst. Surgeon	:	End Time	: 8: AM
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	: Dr. Sravan	C-Arm	:
OT Nurse	: Kuma	Arthroscopy	:
Name of Surgery	: L.S.C.S	Laprosopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	:
		Others	:

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
5/4/24	8 AM	5/4/24	7:30 PM				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
5/4/24	7 AM	5/4/24	11 AM				

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	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

4/4/24 CBC, TSH ✓



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

4/4/24

ECG

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

4/4/24

1+1 ✓

5/4/24

1+



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