BILLING CARD

Mr.DHAYALAN
71/Male/MHV202300846
28/12/2023/IPV000129
Dr.RAJA

Patient Name Mr. Dhayalan
IP No.
Room No. Icu-Ip

D.O.A. 28/12/23 Time 8.00 pm
...ent Per Day 3500/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
28/12/23	8pm.	ER	ICU	Rajmoedo

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
28/12/23	8.20 pm.	28/12/23	at 11.40 pm

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
28/12/23	8.20 pm.	28/12/23	11.40 pm.

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

~~VENTILATOR~~ C-PAP

Date	Start	Date	Disconnect
28/12/23	28/12/23 at 9.30 pm.	28/12/23	10.30 pm.

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
28/12/2023	CBC, urea, creatinine, Electrolytes, LFT,
	RBS, urine r/t [0944], ABG EG7+ (0946)

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

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			
28/12/23	1						

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date

PHARMACY	AMBULANCE
OT DRUGS REPLACED : BILL CLEARED : RETURNS CHECKED :	

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge