



BILLING CARD

Patient Name Baby . T . Hashim

D.O.A. 4/1/24 Time 14:10pm

IP No. 2024000024

Room No. PTA

Rent Per Day 8000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
11/1/24	11am	PIU	2nd Floor	Dayani 218

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
4/1/23	2:30pm	12/1/24	11am				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
			HFNC	4/1/23	2:30pm	11/01/24	11:30am

OPERATION THEA TRE	
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I Asst. Surgeon :	End Time :
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	Inj. Fentanyl :
	Others :

[illegible]

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

CBG				CBG			
4/1/24				10/1/24			
CBG - (1) (PREP 2024/01/20)				CBG - (1) (400325)			
5/1/24		7/1/24		CBG - (1) (400336)			
CBG - (1) (0152)		CBG - (1) (00846)		11/1/24			
CBG - (1) (00167)		8/1/24		CBG - (1) (400344)			
6/1/24		CBG - (1) (0277)		CBG - (1) (400375)			
CBG - (1) (0191)		CBG - (1) (0277)		12/1/24			
CBG - (1) (0018)		9/1/24		CBG - (1) (400381)			
7/1/24		CBG - (1) (0400296)					
CBG - (1) (0226)		CBG - (1) (0303)					
Date							

PHYSIOTHERAPY

NEBULIZER				NEBULIZER			
11/1/24							
Neb (5)							
12/1/24							
Neb: (1) @ 12 PM							

Handwritten signature/initials on the left margin.

Ref:- D. Mahiyanna

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. Maheswaran	4/1/24	5/1/24	6/1/24	7/1/24	8/1/24	9/1/24	10/1/24
Morning		8am	9am	11am	10.30am	12pm	10.30pm
Evening	4pm	6pm	10pm	9pm	6pm	5.30pm	6pm
Night	10pm	6pm	10pm	9pm	6pm		
	PICU	PICU	PICU	PICU	PICU	PICU	PICU
DR. Maheswaran	11/1/24	12/1/24	13/1/24				
Morning	10:15am	9am	9am				
Evening	6pm	6pm					
Night		10pm					

PHARMACY

OT DRUGS REPLACED : Total. 24231
BILL CLEARED : Due. 1594
RETURNS CHECKED :

AMBULANCE

Other Procedures : (specify) :-

HFN/C circuit used 4/1/23

verified by
S. Flaminio
10.45 AM 3/1/24

Admission Officer :

Sister In-charge