



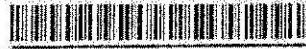
Mr. R. PURUSHOTHAMAN

76/Male/MHV202401096

23/05/2024/IPV2024000413

Patient Named Dr.K.GAYATHRI MD

P No.



BILLING CARD

25 MAY 2024

D.O.A. 23/05/24 Time 11.30 AM

Room No. Single Room AC-316

Rent Per Day 2,200/-

TRANSFER DET AILS

[illegible]

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

OXYGEN

SYRINGE PUMP

[illegible]

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

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[illegible]

[illegible]

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