

DOA: 19/11/24 AT 11:41 AM
D.O.D: 20/11/24 AT 3 PM

BILLING CARD

Mrs. KUMARI.K

60 / Female / MHC202402929

19/01/2024 / IPC2024000162

Dr. ARTHI



D.O.A. 19/11/24 Time 11:41 AM

Patient Name MRS-KUMARI

IP No. 0162124

Room No. 59(4) Ground.

Rent Per Day 1500 RS.

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

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 : 2ml 10ml/Inj. Morphine
	Others :

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

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[illegible]

