BILLING CARD

Patient Name MRS- Neela. N D.O.A 27/1/24 Time 12:40pm

IP No. 20 24000149

Room No. 214/1 Rent Per Day 1500

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
27/1/24	1.30pm	Ceeswalk	2nd floor	R Vinothini 27/1

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

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

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
27/1/24	CBC, ~~CRP~~, RFT (OPKB2024003714)
27/1/24	CRP (24011713) (UP Posted)

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

27/1/24	CT Chest (IP raised)	[illegible]	)

CBG

27/1/24 CBG – ① (119)							
28/1/24 CBG – ① (119)							

CBG

Date	PHYSIOTHERAPY

NEBULIZER

27/1/24							
7pm ①							
11pm ①							
28/1/24							
9am ①							
11pm ①							

NEBULIZER

NAME.

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Jamuna	27/1/24 2pm	28/1/24 11am.					
	6.30pm						

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED : Due: 146-	
RETURNS CHECKED : Tot: 3386/-	

Other Procedures : (specify) :-

verified by
T. Kousalya
2206
29/1/24 at 12 pm.

Admission Officer :

Sister In-charge