BILLING CARD

Patient Name MR. KANNAN. M D.O.A. 31/1/24 Time 12.05 AM

IP No. DO CH000176

Room No. 206 Rent Per Day 2000

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
31/1/2024	12 am	Casualty	First Floor.	SN Kaby 2181.

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
31/1/24.	CBC, RBS, RFT, LFT, Urine complete Trop-I (BRKV2024004141) OP Paid.

RADIOLOGY - ECG / ECHO / X-RA Y / USG / CT / MRI / DRP / BIO-DOPPLER		
31/1/24	ECG (BRKV2024001441)	OP
1/2/24	Echo (20240/452)	IP Posted.

CBG			CBG			
31/1/24	CBG (1) (BRKV2024001441)		OP			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

Ref: VOI from hospitals)

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Jamuna	1/12/24.						
				Received			
				AG			

PHARMACY	AMBULANCE
OT DRUGS REPLACED : V. Jayanthi. BILL CLEARED : No due. RETURNS CHECKED : Tot: 2512-	

Other Procedures : (specify) :-

Verified SN
Bed
1/12/24 at 12.5pm

2447-
65-
2512-

Admission Officer :

Sister In-charge