

02 FEB 2024

MH/ PRINT / 0007 / BILL / FO



Mr.DURAIRAJ

61/Male/MHV202401263

01/02/2024/IPV2024000065

Patient Name Dr.K.GAYATHRI MD

IP No.

**BILLING CARD**

02 FEB 2024

D.O.A. 01/02/24 Time 10.15 AM

Room No. Singp Room AC - 315

Rent Per Day 2,200/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
1/2/24	10.15 AM	ER	ward	Jyo 10049,

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**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
1/2/24	11.15 am	1/2/24	12 pm				

ALPHA BED / SCD PUMP**VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEA TRE

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