

Room No: 4

BILLING CARD**Mrs. VELMATHI**

Patient Name

31 / Female / MHC202405272

IP No.

03/02/2024/JPC2024000361

Room No.

Dr. VALLIAMMAL K



D.O.A. 03/02/24 Time 08:11 P

cash

Rent Per Day 18.50/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	04/02/24	OT No.	①
Surgeon	DR. Vall	Start Time	8.45AM
I Asst. Surgeon		End Time	9.15AM
II Asst. Surgeon	DR. SASIKALA	Dis Pack	
III Asst. Surgeon		Diathermy	
Anaesthetist	DR. Ravi Kumar	C-Arm	
OT Nurse	ANNIS	Arthroscopy	
Name of Surgery	MIP Lap ST	Laprosopy	Camera, MONITOR, F&S
		Sevoflurane / Isoflurane	500 /
		Inj. Fentanyl	2ml 10ml/Inj. Morphine
		Others	① DAY

MONITOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

INFUSION PUMP**OXYGEN**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

SYRINGE PUMP**ALPHA BED****SCD PUMP****VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

RADIOLOGY · ECG · ECHO · X-RAY · USG · CT · MRI · DRP · BIO-DOPPLER

CBG

ABG

ACT

[illegible]

Date _____

PHYSIOTHERAPY

[illegible]

NEBULIZER

OTHERS

[illegible]

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	Laproscoy
	Sevoflurane Isoflurane
	Inj. Fentanyl
	Others

Date

LABORATORY