MH/ PRINT / 0007 / BILL

BILLING CARD

Patient Name: Mrs. Jothika.B
D.O.A. 15/2/24 Time

IP No. 2024000259
Rent Per Day: 1000

Room No. O2W/F

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
15/2/24	2.30pm	Causality	O2W	R. vinodhini Rist cort 2164.
15/2/24	2.00pm	O2W	OT	
15/2/24	3.00pm	OT	O2W	

OPERATION THEATRE

Date : 15/2/24
Surgeon : Dr. Anandh DGO
I Asst. Surgeon : —
II Asst. Surgeon : —
III Asst. Surgeon : —
Anaesthetist : Dr. Jamuna
OT Nurse : S/N. Ranjitha
Name of Surgery : VIV sedation
DSC

OT No. : II
Start Time : 2.15pm
End Time : 2.45pm 30 mints
Dis. Pack : —
Diathermy : —
C-Arm : —
Arthroscopy : —
Laproscopy : —
Sevoflurane / Isoflurane : —
Inj. Fentanyl : Inj. Ketamine. 2cc
Others : O2 - 15 mins

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

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

CBG

15/2/24 CBC (1) (2401246)

CBG

PHYSIOTHERAPY

Date

NEBULIZER

NEBULIZER

DR. ANANDH. (COUNCLLR)

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr Anand	15/2 24,	16/2/24					
Dr Jamuna	15/2/24						

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Total: 3447 BILL CLEARED : Due: 1763 RETURNS CHECKED :	

Other Procedures : (specify) :-

Verified by Dr Kumar ortho at 7.30 AM

Admission Officer	Sister In-charge