

I floor 2e-4.55 Pm cash

IP No: 2400045
MHC - 20240641



BILLING CARD

Gen. Comr - 68

Patient Name Mrs. Vijayalakshmi

D.O.A. 11/2/24 Time 09:35 am

IP No. 0457

Room No. 13152

Rent Per Day 1500

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 11/2/24	OT No.	: 2
Surgeon	: DR. VALLIAMMAL (DWO)	Start Time	: 2.00 pm
I Asst. Surgeon	: Dr. Sasibala DWO	End Time	: 2.30 pm
II Asst. Surgeon	:	Dis. Pack	: -
III Asst. Surgeon	:	Diathermy	: -
Anaesthetist	: DR. RAVIKUMAR (ANES)	C-Arm	: -
OT Nurse	: Regina -	Arthroscopy	: -
Name of Surgery	: D&C	Laproscope	: -
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl : 2ml 10ml/Inj. Morphine	:
		Others	:

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

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 :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date	LABORATORY
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[illegible]

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