BILLING CARD

Patient Name Bl0. SRANYA.K D.O.A. 12/2/24 Time 15:00Pm

IP No. 2024000236

Room No. NICU Rent Per Day 4000

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
12/2/03	3pm	NICU Direct	admission	S/N Tirupathi 16

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
12/2/24	3pm	14/2/24	9am

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect
12/2/24	3.30pm	13/2/24	5PM

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
12/2/24	CBC, CRP, Blood Group erh typing C401913
14/2/24	TB, TSH, CRP, C402005

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

12/2/24	Chest x-ray bedside - ①	(40193)

CBG

12/2/24		
CBG - ①	(40193)	
12/2/24		
CBG - ①	(1928)	
13/2/24		
CBG ①	(1928)	
CBG ②	(401958)	
14/2/24		
CBG - ①	(402005)	

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

Dr. KANAGAGIRI. (COUNCILLOR)

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
	NICU						
DR. Kanagagiri	12/2/24	13/2/24	14/2/24		⑤ → NICU		
		NICU	NICU				
morning	NICU	9.30am	9am.				
Evening	3pm						
Night	NICU 10pm.	NICU 9pm					

PHARMACY		AMBULANCE
OT DRUGS REPLACED :	Vijayaechi	Mercury to Southern Area hospital in our Ambulance
BILL CLEARED :	No due.	
RETURNS CHECKED :	Tot : 4771/-	

Other Procedures : (specify) :- Ryles tube insertion done 12/2/24.

Admission Officer :

Sister In-charge