BILLING CARD

Patient Name Baby. Monisha. D.O.A. 15/02/24 Time 11:40am

IP No. IP2024000261.

Room No. 207. Rent Per Day 2000/—.

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
15/2/24	11.15am	Casualty	2nd Floor	Sarala

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

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
15/2/24	CBC. CRP. OP paid. MK/ERKU 2024006332

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

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			
15/2/24 Neb-3 Neb-4	16/2/24 Neb-2 17/2/24 Neb-4 Neb-3	18/2/24 Neb-4 Neb-2 19/2/24 2am 8am 10am	26				

Dr. Maheshwaran (own case)

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Maheshwaran	15/2/24	16/2/24	17/2/24	18/2/24	19/2/24		
	@11.00 AM W	10.30 AM W	10am W	9am W	9am W		
	(Casualty) W 7pm	3.30pm W	6 Pm. W	8.30pm W	6pm. W		

PHARMACY	AMBULANCE
OT DRUGS REPLACED : V - Jeyan	
BILL CLEARED : No due.	
RETURNS CHECKED : Tot = 4126/=	

Other Procedures : (specify) :-

Verified SW Dept.
19/2/24
at 10.20am

Admission Officer :

Sister In-charge