

## ACTIVITY RECORD FOR BILLING



**SANJIVI HOSPITAL**  
HANDS OF CARE



CASH / CREDIT:

Reg. No. :		I.P.No. : 64		Corporate : .....	
Name of Patient : S. Lakshmi				Age : 60 Sex : F	
Consultant : Dr. N. Suryaprasad				Category :	
Date of Admission : 19/2/24		Time : 1:54 PM		Room / Bed No. : Room 101	
Date of Discharge : 20/2/24		Time : 4:30 PM		Total Days of Stay :	
Anaesthetist : Dr.		Anaesthesia / General / Spinal			
Diagnosis :					
Surgery :					
ACTIVITY CARD UPDATED ON					
DOCTOR'S VISITS					
Doctor's Name / Date					
Dr. Suryaprasad Sir		✓			
Dr. Veerababu Sir		✓			
(Interview)					
MEDICAL EQUIPMENT					
VENTILATOR			MONITOR		
Date	Time of Start	Time of Stop	Date	Time of Start	Time of Stop
SYRINGE PUMP			INFUSION PUMP		
Date	Time of Start	Time of Stop	Date	Time of Start	Time of Stop
OXYGEN			WATER BED <input type="checkbox"/> AIR BED <input type="checkbox"/>		
Date	Time of Start	Time of Stop	Date	Time of Start	Time of Stop
PULSE OXYMETER			GRBS		
No.fo. Time					
GRBS					
Date					Total
Morning					
Evening					
Night					