



BILLING CARD

Patient Name MR. HARIKRISHNAN SD.O.A. 19/1/24 Time 21:45 PMIP No. 2029006286Room No. 0160/17Rent Per Day 1000

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
19/1/24	9 ³⁰ PM	Casualty	General ward	S/n Arin Dai 2230.

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

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	Disconne

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LABORATORY

Date	
19/2/24	CBC, RBS, RFT, Electrolytes (op paid)

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

19/2/24 CT-Abdomen (OP paid)
 20/2/24 RFT & Ser Electrolytes (302402374)

CBG

CBG

PHYSIOTHERAPY

Date

NEBULIZER

NEBULIZER

Prof: Dr. Rajy Sharma (Rms)

						AMBULANCE
PHARMACY						
OT DRUGS REPLACED	:	Total:	3389			
BILL CLEARED	:	due :	70			
RETURNS CHECKED	:	P-10%				

Jus
206/24 @ 8
Sister in-charge