MH/ PRINT / 0007 / BILL / FO

BILLING CARD

Patient Name MR. SUBRAMANIYAN. D   D.O.A 20/2/24   Time 11:40am

IP No. 2024000291

Room No. ICU   Rent Per Day 4100

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
20/2/24	11.30PM	direct	ICU	S/d Gayathri 2120.
25/2/24	11.30pm 11.45pm	(ward Rent)	Twin sharing 212.	T. Priya 2209.
26/2/24	11.45 AM	Twinsharing	Siylus Roy	[illegible]

OPERATION THEATRE

Date :
Surgeon :
I Asst. Surgeon :
II Asst. Surgeon :
III Asst. Surgeon :
Anaesthetist :
OT Nurse :
Name of Surgery :

OT No. :
Start Time :
End Time :
Dis. Pack :
Diathermy :
C-Arm :
Arthroscopy :
Laproscopy :
Sevoflurane / Isoflurane :
Inj. Fentanyl :
Others :

MONITOR

Date	Start	Date	Disconnect
20/2/24	11.30PM	26/2/24	9.00AM
[illegible]	[illegible]		

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
21/2/24	6.30AM	21/2/24	9pm 15
22/2/24	3Am	22/2/24	5Am 2
22/2/24	7am	22/2/24	3. pm. 8
22/2/24	6. pm.	22/2/24	9.00 pm 3
23/2/24	5am	23/2/24	7.00 am 2

SYRINGE PUMP

Date	Start	Date	Disconnect
22/2/24	9.00 pm	24/2/24	4.00 AM.

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect
21/2/24	7 am.	26/2/24	11.45 AM

VENTILATOR (CPAP)

Date	Start	Date	Disconnect
21/2/24	12-AM	21/2/24	6.30AM
21/2/24	9pm.	22/2/24	3Am
22/2/24	5Am	22/2/24	7am
22/2/24	3pm	22/2/24.	6. pm.
22/2/24	9.00pm	23/2/24	5am
23/2/24	7.00AM	23/2/24	9. am.

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
21/2/24	CBC, C.R.P, RBS, RFT, Electrolyte, ABG1 (2024024
22/2/24	RBS, electrolytes (20240248 5] RFT (20240248 5]
22/2/24	Procalcitonin (20242507]
22/2/24	ABG (20242507)
23/2/24	rbs, electrolyte, HB, (20240253 4] urine culture]
23/2/24	urine culture (20240254 7)
23/2/24	urea, creatinine, total count (20240254 9)
24/2/24	rbs, electrolyte (2402578]
24/2/24	Albumin (20240260 7
25/2/24	rbs, electrolyte, LFT, (20240262 4)
26/2/24	RBS, Electrolytes, (2402662]
28/2/24	RFT, Electrolyte, Albumin (SBI)

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

21/2/24	ECG (202402445)		
21/2/24	X-ray Chest ICU (2024024250)		dip raised
21/2/24	CT Chest (IPREQ202402471)		
2			

CBG				CBG			
11:30 PM ①	(202402445)	24/2/24	2 AM	(2402578)	28/2/24		
6 AM ①	(202402445)	"	12 PM	(202402607)	7 AM (2731) ②		
1 pm ①	(202402476)		9 pm	(2402624)			
9 pm ②	(202402488)	25/2/24	2 AM	(2402624)			
2 am ②	(202402488)		1 pm	(202402650)			
1 pm	(2024507)		9 pm ①	(2402662)		28	
9 pm ②	(202402534)	26/2/24	2 am ①	(2402662)			
23/2/24 2 AM	(202402534)		7 pm ②	(2694)			
1 pm	(202402558)	27/2/24					
9 pm ②	(2402578)		CBG - ②	(2757)			

Date	PHYSIOTHERAPY
21/2/24	12.30 Am limb physio.
	4.30 pm limb physio.
22/2/24	11:30 Am limb Physio
	4.00 pm limb Physio.
23/2/24	11:00 Am limb Physio
	3.30 pm Chest Physio
	5.30 Pm Chest Physio + limb Physio.
24/2/24	11:00 Am limb Physio Chest Physio
	3.30 pm Chest Physio
	5.15 Pm limb Physio + Chest Physio T ⑩ 26/2/24
26/2/24	11:30 Am limb physio + Chest physio
	1.30 pm Chest physio. ⑬ 27/2/24
2	5.30 pm limb Physio + Chest Physio.
27/2/24	11.30 Am limb physio + Chest physio
	1.30 pm Chest physio ⑮ 28/2/24

8 16

NEBULIZER				NEBULIZER			
Neb - 26/2/24							
neb ④	⑨						
27/2/24	28/2/24						
neb ⑤							

FD

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. Vinothkumar	21/2/24 (10am) ICU						
Dr. Jamuna	21/2/24 ICU	22/2/24 ICU	23/2/24 ICU	24/2/24 ICU	25/2/24 ICU	26/2/24 ICU	27.2.24
DR. Praveen	21/2/24 ICU	22/2/24 ICU	23/2/24 ICU	24/2/24 ICU	25/2/24 ICU	25/2/24 Night 11pm	
DR. Ravichandran	21/2/24 ICU	22/2/24 ICU	27/2/24				
Dr. Balaprakash	21/2/24 ICU	22/2/24 ICU	23/2/24 ICU	24/2/24 ICU			
Dr. Subashini	21/2/24 ICU						
Dr. Anand (AS)	21/2/24 ICU	23/2/24 ICU	24/2/24 ICU	25/2/24 ICU	26/2/24 (ward)		
Dr. palaniyappan							

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED :	
RETURNS CHECKED :	

Other Procedures : (specify) :-

Admission Officer

Sister In-charge

BILLING CARD

Patient Name MR. SUBRAMANIYAN D.O.A. _____ Time _____

IP No. _____

Room No. _____ Rent Per Day _____

TRANSFER DET AILS

Date	Time	From	To	Sister Signature

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
28/2/24	@8.00Pm	29/2/24	9am

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
23/2/24	9am	23/2/24	10pm
24/2/24	10am.	24/2/24	10AM
24/2/24	10pm	25/2/24	12am
27/2/24.	@ 10.00Am	27/2/24	@5.00Pm
28/2/24	2.00Pm.	28/2/@	7.30Pm
28/2/24	10.00Pm.	29/2/24	9am

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect
23/2/24	10pm	24/2/24	1am.
24/2/24	9PM	24/2/24	10pm

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

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

CBG

CBG

Date	PHYSIOTHERAPY
27/2/24	5:30pm. limb Physio + Chest physio.
28/2/24	11:30 pm limb Physio + chest Physio
	2.00 Pm limb Physio + Chest Physio.
	5.00 Pm limb Physio + Chest Physio.

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr Jammu.	28-2-24						
	W						

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED : Due :- 257/-	
RETURNS CHECKED : Tot :- 75937/-	

Other Procedures : (specify) :-

Total: 78,386

Due : 730

Verified SN Ky 29/2/24 at 1.40pm

Verified by L. Mithya 222 28/2/24 at 1.09pm

Admission Officer :

Sister In-charge