

23 FEB 2024

MH/ PRINT / 0007 / BILL / FO



Mr.DHANDAPANI.R

66/Male/MHV202401509

21/02/2024/IPV2024000129

Dr.D.NIVEDHIDHA



Patient Name

IP No.

Room No. ICU - 1

BILLING CARD

23 FEB 2024

D.O.A. 21/02/24 Time 3:30amRent Per Day 3500/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
21/2/24	3:30am	ER	ICU	S/N [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	: INJ: MORPHINE [Signature]

MONITOR

Date	Start	Date	Disconnect
21/2/24	3:30 AM	23/2/2024	5pm

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
21/2/24	3:30 ^{am}	23/2/24	9am

SYRINGE PUMP

Date	Start	Date	Disconnect
21/2/24	2:30 AM	21/2/24	6:00am
21/2/24	3:50 AM	22/2/24	9am

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect
21/2/24	3:30 AM	21/2/24	4:45 pm

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 :

[illegible]

[illegible]

