



BILLING CARD

 Patient Name MR. RAJ MOHAN V

 D.O.A. 23/2/24 Time 10.00pm

 IP No. 2024000303

 Room No. 01/01/01

 Rent Per Day 1000

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
23/2/24	10pm	Generalist	OTW	Pranitha Vinodhini
25/2/24	12.30 pm	OTW	OTW	Pranitha
27/2/24	12.30pm	TCU	U.W	P. S. Sanyal

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
25/2/24	12.45pm	27/2/24	12.30pm				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
25/02/24	11.00 pm	26/2/24	6.00 am				

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEA TRE

Date :	OT. No. :
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I Asst. Surgeon :	End Time :
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Anaesthetist :	C-Arm :
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Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date

LABORATORY

23/2/24	CBC, LFT, Urine complete Analysis (after)
25/2/24	Electrolytes (202402652)
25/2/24	S. Amylase & Lipase (2402660)
26/2/24	pbs electrolyte, LFT (2402659)
27/2/24	pbs electrolyte, (202402714)
27/2/24	Total Bilirubin (202402741)

23/2/24 ~~ECG~~, ECG ~~(202402642)~~ 2P Raised (202402642)

25/2/24 CT Brain (2402659)

26/2/24 Echo (202402691)

CBG

CBG

25/2/24 (202402642)
@ 10-45 pm

9 pm (2402659)

2 pm (2402659)

1 pm (202402691)

9 pm (2402714)

2 pm (2402714)

PHYSIOTHERAPY

Date

NEBULIZER

NEBULIZER

MINC

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR Niyamachandra	24/2						
	12.10 AM						
Dr. Jamuna	24/2/24	25/2/24	26/2/24	27/2/24	28/2/24		
DR Bala Prakash	25/2/24						
	6 AM						
Dr. Praveen	25/2/24	25/2/24	26/2/24				
	11.00 PM						
Dr. Arun	25/2/24	28/2/24					
Dr. Anandh	26/2/24						
Dr. Chaitanya	28/2/24						
	1 AM						

PHARMACY

AMBULANCE

OT DRUGS REPLACED : OF 1. ME
 BILL CLEARED : TOTAL - 16436/-
 RETURNS CHECKED : NO DUE / -

Other Procedures : (specify) :-

25/2/24 Catheterization done SW
 25/2/24. In. Ice Tamine 20 amp used
 25/2/24. In. fentanyl 2ml @ amp used

28/2/24
 Sister In-charge