

04 MAR 2024

MH/ PRINT / 0007 / BILL / FO



Mr. EUGENE ARUN KUMAR

42/Male/MHV202401687

02/03/2024/IPV2024000153

Patient Name Dr. K. GAYATHRI MD

IP No.



BILLING CARD

04 MAR 2024

D.O.A. 2/3/24 Time 10.50 AM

Room No. Twin sharing non AC 318-A

Rent Per Day 1200/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
2/3/24	11-30 AM	OP	WARD (318)	Jayanthi A.

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

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

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	Others :

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