07 MAR 2024

MH/ PRINT / 0007 / BILL / FO

B/O.MERCY
O/Male/MHV202401718
03/03/2024/IPV2024000157
Dr.(MAJOR) SATHISH KUMAR

BILLING CARD

07 MAR 2024

Patient Name _____ D.O.A. 03/3/24. Time 10.45 PM

IP No. _____

Room No. Nursery ward Rent Per Day _____

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
3/3/24	10.45pm	Direct Admission	Ward (303)	

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

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
7/3/24	CBC, BLOOD GROUP AND RH TYPE, BILIRUBIN - TOTAL, BILIRUBIN - INDIRECT, BILIRUBIN - DIRECT, T4 (FREE), TSH (1451)

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

CBG				CBG			
2/3/24	1+1+1+1+1+1						
	1						

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Date pm @ 10.15	Date 10.45am	Date 5 pm	Date 9.30am	Date am 12.10	Date pm @ 8.45	Date at 11.45am
Dr. Maj. Sathish Kumar	3/3/24	4/3/24	4/3/24	5/3/24	6/3/24	6/3/24	7/3/24
Dr. Prem Kumar	4/3/24 2pm	5/3/24 2pm	6/3/24 @ 16.30	→ DR. SATHISH KUMAR)			
Dr. Prem Kumar	6/3/24 2pm						

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

Other Procedures : (specify) :-

Admission Officer : S. Mal 03/3/24

Sister In-charge