



Baby. RUHAN.K

O/Male/MHV202401974

30/04/2024/IPV2024000338

Patient Name

Dr. SASIKALA

IP No.



Room No.

NICU-1

BILLING CARD

4 MAY 2024

D.O.A. 30/4/24 Time 6:00PM

Rent Per Day

3500/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
30/4/24	6pm	DIRECT ADMISSION	NICU	20/0123
21/5/24	11pm	NICU	WARD 312	m. 10/19/0116

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 WARMER

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
				30/4/24	6:30pm	1/5/24	6am

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
				30/4/24	7pm	1/5/24	6am
				1/5/24	10am	21/5/24	6:30AM

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

[illegible]

1990-1991

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

3/5/24 USG Abdomen (2589)

CBG

CBG

1/5/24 1-1

2/5/24 1

3/5/24 1

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]