BILLING CARD

Patient Name: Baby.MOHAMED REHAN YAFIZ
1/Male/MHM202404249
25/03/2024/IPM2024000245
IP No. _____ Dr.AIYSHA BEEVI
Room No. _____

D.O.A. 25/3/24 Time 00.00pm

Rent Per Day 400/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
25/03/24	11:50pm	ER	1st floor (112)	Cy. usha (3131)

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
25/03/24	11:55pm	26/3/24	1 am

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
26/3/24	CBC / CRP / RFT / LFT / TSH / vit-D (2123) → (2124) → (2125)

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

25/3/24	xray chest (2126)		

CBG

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

25/3/24	1		
26/3/24	4+1		
27/3/24	2+2		
28/3/24	1+1		

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Aysha Beevi	25/3/24	26/3/24	27/3/24	28/3/24			

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Rs. 8704.00	
BILL CLEARED :	
RETURNS CHECKED : 28/3/24 12.28pm	

Other Procedures : (specify) :-

VERIFIED

28/3/24

Admission Officer : 3/3/04

Sister In-charge