BILLING CARD

INSURANCE

Patient Name fazila begum D.O.A. 26/3/24 Time 1:15pm.

IP No. Ipm2024 000247

Room No. 302

Mrs.FAZILA BEGUM K
32/Female/MHM202404256
26/03/2024/IPM2024000247
Dr.AIYSHA BEEVI

Rent Per Day

Date	Time		To	Sister Signature
26/3/24	2.10pm	ER	3rd Floor (302)	M. 2024 03 26
26/3/24	10pm	302	302	8.P 3/90.

OPERATION THEATRE

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
26/3/24	2.30pm	28/3/24	3pm.

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, Sr. VitD3 (2147)
	HBAIC (2148)
	COVI Influenza Panel (2149)
27/3/24	ELECTROLYTES (2165)
28/3/24	Sputum Gene Xpert (2185)

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

28/3/24	HRCT Avanthika	Scan contrx	(Affended Paid)

CBG

CBG

PHYSIOTHERAPY

Gool - Pervisit.

Date	
27/3/24	11.30AM
28/3/24	11:15AM / 4 PM

NEBULIZER

(18)

26/3/24	2+2		
27/3/24	3+3		
28/3/24	3+3		
29/3/24	2+		

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr Arjoha Beevi	27/3/24	28/3/24					

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

Other Procedures : (specify) :-

3159.

Admission Officer :

H. Devi 25/3/24

Sister-in-charge