BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Mrs. Madhumitha D.O.A. 13/09/24 Time 9:26 pm

IP No. 2022100036

Room No. 208 Rent Per Day 925/ Day

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
13/09/24	9.30pm	EMR	Ward - 213	Shitha S.

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

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

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	:

Date	LABORATORY
19/09/24	CBC, Sr. Electrolytes, RBS, Sr. Proteins, Sr. Calcium, Sr. Magnesium

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

CBG

CBG

14/9/24	(1).		

PHYSIOTHERAPY

Date	

NEBULIZER

NEBULIZER

13/9/24	(1)		
14/9/24	(1)		
15/9/24	(1).		

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Nambathar	13/09/24 (1) (OP paid)	14/9/24 (1)	15/9/24 (1)				
A. Parthiban	13/9/24 (1)	14/9/24 (1)					

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

Other Procedures : (specify) :-

17/9/24

→ Johnson MRI Centre (MRI Brain & MRV) Done

→ BEG. (outside Scan) centre.

Self Paper

D.O.A : 13/9/24.

D.O.D : 15/9/24.

ward S/N. Adv.

Admission Officer :

Sister In-charge