



BILLING CARD

Patient Name Mrs. Kumutha

D.O.A. 15/6/24 Time 04:33 Pm

IP No. JPE2024000121

Room No. 01-19.

Rent Per Day 1400 / Day .

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
15/6/24	6pm	-	Ward ,	Aarthu.
16/6/24	7.45pm	ward	OT .	Dr. Lavanya .
16/6/24.	9.18pm	OT	ward .	Dr. Vsk .

OPERATION THEA TRE

Date	: 16/6/24	OT No.	:
Surgeon	: Dr. Madhan	Start Time	: 8 10am
I Asst. Surgeon	: Dr. Narmadha .	End Time	: 9 9m .
II Asst. Surgeon	:	Dis. Pack	: -
III Asst. Surgeon	:	Diathermy	: Yes .
Anaesthetist	: Thirumalai raja .	C-Arm	: -
OT Nurse	: Jamuna .	Arthroscopy	: -
Name of Surgeon	(Drp.) LAVYA .	Laprosopy	: Yes .
		Sevoflurane / Isoflurane	: -
		Inj. Fentanyl	: -
		Others	: -

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	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 :

LABORATORY

[illegible]

CBG

CBG

Date

PHYSIOTHERAPY

17/6/24

① - Visit. (Pelvic exercise).

NEBULIZER

NEBULIZER

