BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Mrs. Veerammal.

IP No. 2024000280

D.O.A. 31/8/24 Time 4.30pm.

Room No. General ward

Rent Per Day ₹50 / Day

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
31/8/24	5.00pm.	EMR.	Central Ward.	Srithar.P.
31/8/24.				

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

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

CBG			

CBG			

Date	PHYSIOTHERAPY

NEBULIZER			

NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Kannammal.	31/08/24	2/9/24	3/9/24				
	1	(1)	1				
DR. Parthiban	31/8	1/9/24	2/9/24				
	1	1	1				
Dr. Jayachandran.	2/9/24						
	(1).						
Rs. (500 pwd)							

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

Other Procedures : (specify) :-

→ IV line. start at. @ by. Shivaji.

D.O.A 31/8/24 5PM

D.O.D 3/9/24 4PM

Dr. Jayachandran

Admission Officer :

Sister In-charge