BILLING CARD

Mrs.PARAMESHWARI
27/Female/MHE202404976
03/05/2024/IPE2024000056
Dr KANNAMMAL DURAISAMY

Patient Name _____ D.O.A. 03/5/24 Time 8:34 AM

IP No. _____

Room No. _____ Rent Per Day 1400

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
3/5/24	8:30 am	—	ward	A.Ork.
3/5/24	12.30 pm	Ward	OT	A.Ork
3/5/24.	1.45 pm	OT	ward.	A.Ork.

OPERATION THEA TRE

Date	: 3/5/24	OT No.	:
Surgeon	: Dr. Namradha.	Start Time	: 1.15 pm
I Asst. Surgeon	:	End Time	: 1.30 pm.
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	: Dr. Javid.	C-Arm	:
OT Nurse	: Sis. Jamuna Rani.	Arthroscopy	:
Name of Surgery	: MTP & Sterilization.	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 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
4/5/24	Biopsy.

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

3/5/24	ECG		

CBG

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

~~NEBULIZER~~ Dressing.

4/5/24	(1)		

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Nirmala	3/5/24 ①	4/5/24 ①					
Dr. Kanagammal.	3/5/24 ①	4/5/24 ①					

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

Other Procedures : (specify) :-

D.O.A : 3/5/24 8.30am
D.O.S : 3/5/24.
D.O.D : 4/5/24. 2pm

Sister In-charge

Session Officer :