



BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name MR. Thangamuthu

D.O.A. 21/09/24 Time 6.30pm

IP No. IPE2024000221

Room No. ICU

Rent Per Day 3500 / Day

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
21/09/24	6.30	OP	EMR.	C. Sri
21/09/24	7.15	EMR	ICU.	Ananthi

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	Date	Start	Date	Disconnect
21/09/24	6.30pm	23/9/24	5.00AM				

INFUSION PUMP

OXYGEN

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
21/09/24	6.30pm	23/9/24	5.00AM	22/9/24	11.00pm	23/9/24	5.00AM

SYRINGE PUMP

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
22/9/24	6.00AM	23/9/24	5.00AM	21/09/24	7.15pm	23/9/24	5.00AM

VENTILATOR

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 :

LABORATORY	
Date	
21/09/20	CBC, Urine routine, Sr. Electrolytes, ABG, RET, ADG, LFT.
22/7/24	ABG, Urea, Creatinine, Sr. Electrolytes, ABG

OpBill: NO MM: 4/DEC 204d290

$$|Q| \leq |Q_S|_{2u}.$$

of Bill no 11 MV/mv/DAL 202401230

23/9/24

1009

CBG

22/9/24

Q

PHYSIOTHERAPY

NEBULIZER

22	9/24
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