BILLING CARD

Patient Name K. Appayamma (60/F) D.O.A. 5/4/24 Time 3:13 PM

IP No. 107 Addis :- (Rt) CVA.

Room No. Single room (Non Ac) 104 Rent Per Day 3000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
5/4/24	4pm	EMR	105	P. Sandhya 007

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	:

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
6/4/24	FBS

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

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. K.V.V. Satyanarayana (Neuro Surgeon)	6/4/24	8/4/24	"	10/4/24			
Dr. Sowmidhi (Physiotherapist)	7/4/24 patient from paid	8/4/24 paid from patient	9/4/24 paid by patient				

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED : 10/4/24 Medve pharmacy	
RETURNS CHECKED :	

Other Procedures : (specify) :-

1. Folice catheter done on - 6/4/24 - 2pm
2. Ryle's tube done on - 6/4/24 - 2pm.
3. Ryle's Removed at 1.30 pm 10/4/24
4. foley's Removed at 2.00 pm 10/4/24

Admission Officer :

P. Vardhini. (00990)
Sister In-charge