

26 APR 2024

MH/PRINT / 0007 / BILL / FO

	Mr. JAISANKAR.N	BILLING CARD
	74/Male/MHV202402223	
	23/04/2024/IPV2024000317	
	Dr. RAJA	
Patient Name		26 APR 2024
IP No.		D.O.A. 23/4/2024 Time 10.55 PM

Room No. 100

Rent Per Day 3500/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
23/4/24	11 pm	ER	100	S. E. S. / 10014
25/4/24	11 AM	100	Ward	MD. R. S.

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 :	Laproscopey :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
23/4/24	11 PM	24/4/24	11 am				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
				24/4/24	1.50 pm	24/4/24	7 PM

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 :
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III Asst. Surgeon :	Diathermy :
Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopey :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

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

2479/24

ECHE SCREENING (2398)

CBG

CBG

24/4/24

1421411

1441

25	42
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111111

1114

26/4/24

~~SECRET~~

Date _____

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]