BILLING CARD

Patient Name Mas. Monish. M D.O.A. 18/4/24 Time 03:16pm.

IP No. 2024000258

Room No. GIW 1M Rent Per Day 1000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
18/7/24	4:30am	casualty	GIW	SN Kavya.

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
18/04/24	CBC, CRP, RFT, SR. electrolyte, RBS, WIDAL, MP & MF. (OPTB 20240183B).
18/4/24	Dengue IgM Elisa, Anti mumps IgM (5153)
21/4/24	CBC, CRP, PS (20240527)

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

18/4/24	xray chest (5152)		
18/4/24	USG Scrotum Doppler	4 check	(Kalirajanscan) Own veh

CBG			CBG				

Date	PHYSIOTHERAPY

NEBULIZER			NEBULIZER				

FD

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. maheshwaran	18/4/24	19/4/24	20/4/24	21/4/24	22/4/24		
Mrg	8.30 pm	12.15 pm	1 pm	12 pm	10.30 am		
Eve	10pm	10pm	9pm	10pm	6.30pm		
Dr. Kamalakannan	20/4/24 11.30pm						

PHARMACY		AMBULANCE
OT DRUGS REPLACED	: Total: 4383	
BILL CLEARED	: NO: Dee	
RETURNS CHECKED	: P. Kala	

Other Procedures : (specify) :-

BS

Admission Officer :

Sister In-charge