

BILLING CARD**Mr. KAMALA GANESH K**

39/Malc/MHM202404671

Patient Name

30/04/2024/IPM2024000338

D.O.A. 30.4.2024 Time 9:30 AM

IP No.

Dr. VAISHNAVI GANESAN

Room No.

Rent Per Day 4000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
30/4/24	11:40am	ER	1st floor 114	R. Monarap 0210

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**INFUSION PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OXYGEN**SYRINGE PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP**VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEA TRE

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Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER	
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30/4/24 ECE (3003)

30/6/24 EXP (3003)

30/12

1/15/24	CT- Neele, plain with contrast (Cromini Scan) credit
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3/5/24	xray Ls spine Ap Lat (3094)	(3021) ✓
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	CBG
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	CBG
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3	5	2	4	① (3 5 7 9)	
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Date

[illegible][illegible]

NEBULIZER

[illegible]

CONSULTANT NAME	Date	Date	Date	Date	Date	Date
Dr. Kalshnavi	30/4/24	1/5/24	2/5/24	3/5/24		
Dr. MDhammed Siddique	30/4/24	1/5/24				
Dr. Aravind Dr. Suresh (OFS)	30/4/24	1/5/24				
Dr. Shanmuga Sundaram (Ortho)	3/5/24					
PHARMACY	AMBULANCE					
OT DRUGS REPLACED :						
BILL CLEARED :						
RETURNS CHECKED :						
Other Procedures : (specify) :- 						
Admission Officer :	 Sister In-charge					