Cash

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

DOD: 15/7/24

Patient Name K. Gopala Raju D.O.A. 10/07/24 Time 9:54 pm

IP No. 332

Room No. SICU Rent Per Day

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
10/7/24	8:45pm	direct S.I.C.U.	Admission	SYAMALA
12/7/24	11.20 AM	SICU	ROOM 202	Kumari

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
10/7/24	9:54 Pm	12/7/24	9:20 AM

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
10/7/24	10:00 Pm	12/7/24	7 AM

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
07/24	TLC.
15/7/24	TLC. CRP

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

12/7/24	X-RAY		

CBG

9/07/24			1				
11/07/24	1	1	1				
12/7/24	1	1	1				
13/7/24	1	1	1				
14/7/24	1	1	1				
14/7/24	1	1					

CBG

Date	PHYSIOTHERAPY

NEBULIZER

10/7/24			1				
12/7/24	2+2	1	1				
12/7/24	2+2	1	1				
13/7/24	2+2	1	1				
14/7/24	1+1	1	1				
15/7/24	2+1						

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Krishna Prithviraj (Pulmonologist)		11/7/24	12/7/24	13/7/24	14/7/24	15/7/24	
Dr. Katgun Sir. Psychiatrist.	12/7/24 (paid) By patient						

PHARMACY

OT DRUGS REPLACED :

BILL CLEARED : Med - 8203

RETURNS CHECKED : Return - 1612
6591

15/7/24

AMBULANCE

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge