



BILLING CARD

Patient Name B/O. BRINDHA MAHALAKSHMI.

D.O.A. 11/5/24 Time 17:00pm

IP No. 2024000666

Room No. 205

Rent Per Day 2000

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
11/5/24	5 pm	Causally	NICU	N. Viki 2004
			(observation)	
11/5/24	11 pm	NICU	II floor	S/w Kirthika 169

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 :	Laprosocopy :
	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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OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date

~~LABORATORY~~

11/5/24 ~~SBR. PTINR. BLS&senhuf (6204)~~
Meenatsli Lab

[illegible]**CBG**

cbq-1	cb205)
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12/8/24

UBG - ① (6266)

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PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]