BILLING CARD

Patient Name Child: vaghulya. S. S. D.O.A. 5/5/24 Time 12.30.Pm

IP No. 2024000631

Room No. 201 Rent Per Day 2000

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
5/5/24	@12.30Pm.	Casualty	2nd Floor	Sr. Subarna
6/5/24	@12.00Pm	2nd Floor	PICU	@2/00

OPERATION THEA TRE

Date	:	OT No.	:
Surgeon	:	Start Time	:
I Assi. 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
6/5/24	12.30pm	07/5/24	02.45AM

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
6/5/24	CBC, RFT, Electrolytes (5871.)
6/5/24	CRP (5881)
6/5/24	Blood Culture (5905)

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

CBG

5/5/24
CBG ①
6/5/24
CBG - ② (5889)
7/5/24
CBG - 1 (5905)

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

MMC

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. maheshwaran	05-05-24	6/5/24					
morning	10pm W	10.30am W					
Evening		2pm MW					
Night		10.30pm MW					

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED : Total - 11092	
RETURNS CHECKED : due - 1525	

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge