MH/ PRINT / 0007 / BILL / FO

BILLING CARD

Patient Name Mast. S. Kavinesh D.O.A. 12/5/24 Time 17:30pm

IP No. 202400 0670

Room No. PCW Rent Per Day 4100/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
12/5/24	6.00pm	ER	PCW	Sgaak

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
12/5/24	6.15pm	14/5/24	2.30 pm				

OXYGEN				SYRINGE PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
12/5/24	9PM	13/5/24	6 am	9am.			

ALPHA BED / SCD PUMP				VENTILATOR			
Date	Start	Date	Disconnect	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
12/5/24	CBC, CRP, RBS, ESR, RFT, LFT, [illegible], D-DIMER, Serology, Sr. Electrolytes (2024,022270) OP paid.

14/05/24

RADIOLOGY - ECG / ECHO / X-RA Y / USG / CT / MRI / DRP / BIO-DOPPLER			
12/5/24	CT brain, CT whole spine		
12/5/24	Xray chest (202402270)	OP Paid	
13/5/24	CT brain (8311)		

CBG				CBG			
12/5/24	CBG (202402270)			OP Paid			
10pm	( )						
13/5/24 2am	(202406278)						
6am	(20240631)						
1pm							
9pm	(202406322)						
14/5/24	(2024063700)						
6am	(202406342)						
1pm	(20240638)						

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

(Ref :- Marakkayar Ambulance 2000)

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Nirmal	12/5/24	13/5/24.					
DR. Rajarajan	12/5/24	13/5/24. (call advice)					
Dr. Vijayakala Ranjani (ENT)	12/5/24						
Dr. Maheshwaran	12/5/24 10 pm	13/5/24 10 am					
Dr. Vineeth Kumar	12/5/24	13/5/24					
				Verified AQ			

PHARMACY

OT DRUGS REPLACED : total : 1806/-

BILL CLEARED :

RETURNS CHECKED : NO due.

AMBULANCE

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge