

I floor

cash

BILLING CARD

Gen. ward - 13(2)

Patient Name

Mrs. KAVITHA

48 / Female / MHC202416571

22/05/2024 / IPC2024001425

Dr. VALLIAMMAL K



IP No.

Room No.

D.O.A. 22/5/24 Time 7:53 am

Rent Per Day 1500/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 22/5/24	OT No.	: 11
Surgeon	: Dr. Valliammal	Start Time	: 4:00 pm
I Asst. Surgeon	: Dr. Sasikala	End Time	: 4:30 pm
II Asst. Surgeon	: —	Dis. Pack	: —
III Asst. Surgeon	: —	Diathermy	: —
Anaesthetist	: Dr. Ravikumar	C-Arm	: —
OT Nurse	: KAVI	Arthroscopy	: —
Name of Surgery	: F&C	Laproscopy	: —
		Sevoflurane / Isoflurane	: —
		Inj. Fentanyl	: 2ml 10ml / Inj. Morphine 10 Amp
		Others	: Small Biopsy 1

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 THEATRE

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
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22/5	FBS	6613
22/5	BT, CT	- 6618
22/5	HPE small biopsy	- 202406625

[illegible][illegible][illegible]

NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBER
			/				