

30 MAY 2024

MH/ PRINT / 0007 / BILL / FO



Patient Name

IP No. _____

Room No. Triple sharing

Mrs. R. NAGALOHANI

63/Female/MHV202402810

26/05/2024/IFV2024000421

Dr. A. SANDOSH



BILLING CARD

30 MAY 2024

D.O.A. 26/05/24 Time 4:00am

Rent Per Day

1200/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
26/5/24	4 PM	ER	WARD	Sano. 7/0135
26/5/24	10:25AM	OT	WARD PCU	Enanta 126
27/5/24	10:15am	ICU	WARD	Prigya 0052

OPERATION THEA TRE

Date	: 26/5/24	OT No.	: 2
Surgeon	: Dr. Santhosh (neuro)	Start Time	: 7:30am
I Asst. Surgeon	: nil	End Time	: 9:30 AM
II Asst. Surgeon	: nil	Dis. Pack	: nil
III Asst. Surgeon	: nil	Diathermy	: Used
Anaesthetist	: Dr. Subhashini	C-Arm	: nil
OT Nurse	: Saraswathi, Eenth, hapi	Arthroscopy	: nil
Name of Surgery	: Emergency	Laproscopy	: nil
Laprosomy done	: W.A	Sevoflurane / Isoflurane	: 2 bag used
Container Used	: (Medium - 1)	Inj. Fentanyl	: 1 amp used
		Others	:

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
26/5/24	10:30am	27/5/24	10:15AM				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

[illegible]

LABORATORY

~~CBC: ELECTROLYTES (3049)~~

~~CRC, UDPA, CRBATING, ELECTROLYTES [3059]~~

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

~~26/5/24 CCG (3053)~~

CBG

CBC

26	5	24	1	1	1
----	---	----	---	---	---

27	15	24	141
----	----	----	-----

Date _____

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

