

**BILLING CARD**Patient Name Baby. S. SanikaD.O.A. 27/5/04 Time 19:30pmIP No. 202400730Room No. 207Rent Per Day 2000/-**TRANSFER DET AILS**

Date	Time	From	To	Sister Signature
27/5/04	8:00pm	Casuarina	2nd Floor	Sr. Baby. S. Sanika

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 :	Laproscopey :
	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

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LABORATORY

27/8/24

CBL, CRP, RFT, & Electrolyte (202405208) OP Paad
(OPK13202402560) OP Paad.

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

28/5/24 USG Abdomen Kalrojan Scan hospital Ambulance.

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

Ref :- D. Mani rana

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