



Mr. SUBAN M

40/Male/MHV202402840

27/05/2024/IPV2024000426

Dr. A SANDOSH



BILLING CARD

04 JUN 2024

D.O.A. 24/05/24 Time 9:20pm

Patient Name

IP No.

Room No. ICU 3

Rent Per Day 3500/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
27/5/24	9.30pm	DIRECT	ICU	[Signature]
28/5/24	9pm	ICU	WARD 302(B)	M. 0056

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	Laproscoy
	Sevoflurane / Isoflurane
	Inj. Fentanyl : 2 amp used + 2 amp + 3 amp
	Others : 1 amp + 5 amp + 5 amp

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
27/5/24	9.30pm	31/05/24	10.30am				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
27/5/24	9.30pm	28/5/24	9.30pm	28/5/2024	1.50pm	31/05/24	10.30am
30/5/24	1.30pm	30/05/24	6.00pm				

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 :

[illegible]

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

27/5/24 BEDSIDE X-RAY (3072)
 28/5/24 CT CHEST (P) (3086)
 28/5/24 CHEST X-RAY (B.S) (3086)

CBG

CBG

28/5/24 1+1+1
 29/5/24 1+1+1
 30/5/24 1+1+1
 31/5/24 1

Date

PHYSIOTHERAPY

29/5/24 PHYSIO - 2nd - MORNING / PHYSIO - 2nd - EVENING
 30/5/24 PHYSIO - 1st - MORNING / EVENING
 31/5/24 PHYSIO - 1st - MORNING / EVENING

NEBULIZER

NEBULIZER

28/5/24 1+1+1 4 16/24 1
 29/5/24 1+1
 30/5/24 1+1
 31/5/24 1+1
 1/6/24 1+1
 2/6/24 1+1
 3/6/24 1+1

[illegible]