

**BILLING CARD**

MH/ PRINT / 0007 / BILL / FO

Patient Name M. Bhulapshmi; 68/FD.O.A. 29/7/24 Time 3:58 PMIP No. 360DD 9/8/24Room No. single room non ACRent Per Day 3000**TRANSFER DETAILS**

Date	Time	From	To	Sister Signature
29/7/24	4:15 PM	CHK	IP5	Chaulokatti
1/8/24	3:30 PM	TOX	General ward	Asli
6/8/24	3:45 PM	Q/W	SCW	mami

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 :

MONITOR

Date	Start	Date	Disconnect
6/8/24	5:30 PM	9/8/24	3:30 PM

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
9/8/24	5:30 AM	6/8/24	4 PM

SYRINGE PUMP

Date	Start	Date	Disconnect
2/8/24	6:15 AM	2/8/24	11:30 PM
7/8/24	2 PM	8/8/24	12 PM
7/8/24	5:30 PM	8/8/24	9 AM

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect
			(N2O)
			(ventilator)

NIV**VENTILATOR**

Date	Start	Date	Disconnect
6/8/24	4 PM	7/8/24	1:30 AM
7/8/24	1:00 AM	7/8/24	2 PM

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
31/7/24	Hb%, Electrolytes
6/8/24	Sr. Creatinine, Sr. Electrolytes
6/8/24	Blood group.
6/8/24	ABG, sr. electrolytes, TROP-T,
7/8/24	A&C, CBC
7/8/24	Sr. electrolytes,
8/8/24	Blood c/s, urine c/s, TC, DC, Platelet count, sr. creatinine sr. electrolytes
9/8/24	TC, DC, platelet count, creatinine, electrolyte)

2

2

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1

1

1

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9

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1

2

2

2

LABORATORY

43%, Electrolyte

SR. Creatine, SR. Electrolytes

Blood group.

ABla, 18: electron trap - I,

$\overline{ADH}, \overline{CB' C'}$

sr. electrolyte,

Blood c/s, urine c/s, TC, DC, Platelet count, sr. Overline
sr. electrolytes

TS, DL, platelet count, Creatinine, Electrolyte

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

29/7/24 x-ray pelvis & both hips-AP
5/8/24 ECG, chest x-ray

6/8/24 E.C.G. & Echo, ECG
5/8/24 E.C.G.

CBG

CBG

6/8/24

7/8/24

8/8/24

9/8/24

2

2

2

3

2

2

3

1

2

20

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

3/4/8/24

5/8/24

7/8/24

8/8/24

9/8/24

1

1

2

1

1

1

1

1

1

1

14

