MH/ PRINT / 0007 / BILL / FO

BILLING CARD

Patient Name mr. Nivas. G   D.O.A. 01/06/24 Time 9.30 Pm

IP No. 2024000759

Room No. G/W(M)   Rent Per Day 1000

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
1/6/24	10.30pm	casualty	Gward.	SnBaby 2182.
2/6/24	11 am	GW	OT	[illegible]
2/6/24	1.00AM	ot	ward.	karthika.

OPERATION THEATRE

Date :	1/6/24.	OT No. :	IInd ot
Surgeon :	Dr. Vigneshwaran	Start Time :	11-30 pm.
I Asst. Surgeon :	—	End Time :	1.00 pm.
II Asst. Surgeon :	—	Dis. Pack :	—
III Asst. Surgeon :	—	Diathermy :	5 mts.
Anaesthetist :	Dr. Vinoth kumar	C-Arm :	—
OT Nurse :	karthika.	Arthroscopy :	—
Name of Surgery :	+ S/A.	Laproscopy :	—
		Sevoflurane / Isoflurane :	—
		Inj. Fentanyl :	—
		Others :	—

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

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	:

Date	LABORATORY
2/1/624.	CBC, RBS, RFT, Serology, BT, CT, Blood grouping (typing) CR2240533 Electrolytes

RADIOLOGY - ECG / ECHO / X-RA Y / USG / CT / MRI / DRP / BIO-DOPPLER			
1/6/24.	ECG. Chest xray (2024005359)		OP Rad R.

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

Dr. Vigneshwaran Cown case

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Vigneshwaran	2/6/24	2/6/24					
			(9)				

PHARMACY

OT DRUGS REPLACED :

BILL CLEARED : Due :- 3003.00.

RETURNS CHECKED :

Tot :- ~~3686.00~~ 5066.

Other Procedures : (specify) :-

OT :- 3003.00

AMBULANCE

Admission Officer :

Sister In-charge