

**BILLING CARD**Patient Name Mr. K. Raja Rao, 70y/MD.O.A. 2/6/24 Time 10:08 AMIP No. 261DOD → 4/6/24Room No. 104 (NMAC)Rent Per Day NMAC (3,000/-)**TRANSFER DET AILS**

Date	Time	From	To	Sister Signature
2/6/24	10:40 AM	EMR	104 - Room	Sudha

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 :

MONITOR**INFUSION PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
2/6/24	8 PM	3/6/24	12:30 PM				
3/6/24	3:00 PM	4/6/24	11 AM				

OXYGEN**SYRINGE PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
				2/6/24	8:30 PM	3/6/24	12:30 PM
				3/6/24	8 AM	3/6/24	12:30 PM
				3/6/24	3:00 PM	4/6/24	01 AM

ALPHA BED / SCD PUMP**VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

[illegible]

OT. No.

Start Time

End Time

Dis. Pack

Diathermy

C-Arm

Arthroscopy

Laparoscopy

Sevoflurane / Isoflurane

Inj. Fentanyl

Others

LABORATORY

CBC-T, ABC for malaria / Dengue serology

RFT, Peripheral spec.

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

2/6/24

ECG (Paid in OP by patient)

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

