(50)

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

Patient Name Mr. A. Richardson D.O.A 11/6/24 Time 20:00pm

IP No. 2024000807

Room No. 205 Rent Per Day 2000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
11/6/24	9pm	casuality	2nd floor	Revinodhini 2/6/24

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

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
11/6/24.	CBC. CRP (20240B844) (OPK1320240B844) OP Paid.

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

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

mmc

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Jerome.	12/6/24						
				Verified.			
				A-2			

PHARMACY		AMBULANCE
OT DRUGS REPLACED	: V. Jayanthi	
BILL CLEARED	: No due.	
RETURNS CHECKED	: Tot:- 908/-	

Other Procedures : (specify) :-

Admission Officer

12/6/24 10AM.
Sister In-charge