BILLING CARD

Patient Name MR. MALLANAVAKKAR. D.O.A. 10/7/24. Time 3.30 pm.

IP No. IPE2024000178

Room No. G.23. Rent Per Day 1400/- Day

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
10/7/24	3:30pm	EMR.	Ward	SIN Kokila
11/07/24	5 pm	Ward.	Ward	

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
10/7/24	3:30pm	10/7/24	5pm
10/7/24	5.30 pm	11/7/24	5pm

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
10/7/24	CBC, Urea, Creatinine, Sr. Electrolytes, Urine R/E, LFT, ABG
11/7/24	ABG, urine culture
13/7/24	CBC, urine R/E, Sodium, potassium urea, creabinine.

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

CBG

10/7/24	(1) + (1)

CBG

PHYSIOTHERAPY

Date	
15/7/24	(1) - visit
16/7/24	(1) - visit

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Parthasarathi Anandh	10/7/24 (1)	11/7/24 (1)	12/7/24 (1)	13/7/24 (1)	15/7/24 (1)	16/7/24 (1)	
DR. Rahul	10/7/24 (1)	11/7/24 (1)					
DR. Manikandan	10/7/24 (1)						

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED :	
RETURNS CHECKED :	

Other Procedures : (specify) :-

D.O.A : 10/7/24

D.O.D : 16/7/24.

Admission Officer :

Sister In-charge