BILLING CARD

Patient Name MRS. JASEEMA BANU. D.O.A. 16/6/24 Time 13:00PM

IP No. 2024000820

Room No. 203 Rent Per Day 2000

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
16/6/24	2pm	Casualty	Ward	Sr Sebastian

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
16/6/24	CBC, RFT, LFT, Sr. Electrolytes, BT CT, APTT, PT INR (Approved)
16/6/24	Dengue (card method)
17/6/24	platelet, PCV (7907) IP Raised

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

16/6/24	ECG (opposite) X-ray Chest		

CBG

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

NEBULIZER

NML

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
1. Dr. Jamuna	16/6/11						
1 visit	12'11 PM						
Evening	6.40pm						

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Total: 2590	
BILL CLEARED :	
RETURNS CHECKED : NV: Dell @.um.	

Other Procedures : (specify) :-

Admission Officer :

D. Saroja
Sister In-charge