

**BILLING CARD**Patient Name Mo.k. DhormanD.O.A. 16/6/24 Time \_\_\_\_\_IP No. 20 24000 822Room No. 20Rent Per Day 4100 /-**TRANSFER DET AILS**

| Date    | Time               | From     | To  | Sister Signature |
|---------|--------------------|----------|-----|------------------|
| 16/6/24 | 8:30 <sup>PM</sup> | Casualty | Icu | Sabarna          |
|         |                    |          |     |                  |
|         |                    |          |     |                  |
|         |                    |          |     |                  |
|         |                    |          |     |                  |
|         |                    |          |     |                  |

**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 |
|---------|--------|---------|------------|------|-------|------|------------|
| 16/6/24 | 8:45pm | 17/6/24 | 11:50am    |      |       |      |            |
|         |        |         |            |      |       |      |            |
|         |        |         |            |      |       |      |            |
|         |        |         |            |      |       |      |            |

**OXYGEN****SYRINGE PUMP**

| Date    | Start | Date    | Disconnect | Date    | Start  | Date    | Disconnect |
|---------|-------|---------|------------|---------|--------|---------|------------|
| 16/6/24 | 9pm   | 17/6/24 | 2am        | 16/6/24 | 8:45pm | 17/6/24 | 11:50am    |
|         |       |         |            | 16/6/24 | 8:00pm | 17/6/24 | 11:50am    |
|         |       |         |            |         |        |         |            |
|         |       |         |            |         |        |         |            |
|         |       |         |            |         |        |         |            |

**ALPHA BED / SCD PUMP****VENTILATOR**

| Date    | Start  | Date    | Disconnect | Date    | Start | Date    | Disconnect |
|---------|--------|---------|------------|---------|-------|---------|------------|
| 16/6/24 | 8:45pm | 17/6/24 | 11:50am    | 17/6/24 | 2am   | 17/6/24 | 11:50am    |
|         |        |         |            |         |       |         |            |
|         |        |         |            |         |       |         |            |
|         |        |         |            |         |       |         |            |



[illegible]

## LABORATORY



[illegible]



Ref: - Medharon Ambulance 2000

| Date    | Date | Date | Date | Date | Date | Date |
|---------|------|------|------|------|------|------|
| 11/1/24 |      |      |      |      |      |      |

[illegible]

## PHARMACY

## AMBULANCE

OT DRUGS REPLACED : Thy. me

BILL CLEARED : TOTAL - 20905/-

RETURNS CHECKED : no due

Other Procedures : (specify) :-

Other Procedures : (specify) :-  
16/6/24 central line inserted by Dr. Jamuna.  
catheterization done in casualty.

16/6/24. 1 unit whole blood transfused

16/6/24 - 1 unit whole blood (1 unit b.p.)  
Intubation Done to Kartkeyan  
17/6/24 - 1 unit whole blood (2 unit b.p.)

17/6/24. ① Unit whole blood + some D<sub>10</sub>

1-16/24. Pyles turn Done

Admission Officer :

### Sister In-charge

Verified by  
S. Gupta  
17/11/2017  
In-charge