

I - floor -

G/W

BILLING CARD



Mrs. DHIVYA

33/Female/MHC202420284

20/06 2024/IPC2024001703

Patient Name Dr. VALLIAMMAL K

IP No.



Room No. I - Non AC

D.O.A. 20/6/24 Time 9:47am

Rent Per Day Rs. 1500/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 21/06/24	OT No.	: 02
Surgeon	: Dr. Valliammal	Start Time	: 6.30am
I Asst. Surgeon	: Dr. Malini	End Time	: 7.10am
II Asst. Surgeon	: -	Dis. Pack	: -
III Asst. Surgeon	: -	Diathermy	: -
Anaesthetist	: Dr. Ravikumar	C-Arm	: -
OT Nurse	: Sri Mathu	Arthroscopy	: -
Name of Surgery	: LSES	Laprosopy	: -
		Sevoflurane / Isoflurane	: -
		Inj. Fentanyl	: 2ml 10ml/Inj. Morphine
		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

Date	Start	Date	Disconnect

SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

[illegible]

OPERATION THEATRE	
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	

Date	Others
	LABORATORY
20/6/24	CBC, BT, CT, RBS. - 202407852
20/6/24	Urine Routine Analysis - 2407860
21/6/24	LFT, Urea, creatinine, Uric acid, Urine Albumin - 2407860

2016124	CBC, BT, CT, RBS. - 202407852
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20/6/24	Urine Routine Analysis - 2407860
21/6/24	1 ET - 12021

21/6/24 LFT, urea, creatinine, uric acid, urine Albumin-24

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

CBG				ABG		ACT	
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS

Date	PHYSIOTHERAPY						

NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS