BILLING CARD

Patient Name Mrs. Valambal . R D.O.A 21.06.24 Time 4.40Am

IP No. IP2024000834

Room No. 215 Rent Per Day 1500

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
21/6/24	5.00am	ER	3rd Floor	Le. baby

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
21/6/24	CBC, PBS, RFT, Sr. Electrolytes, HbA1c, urine complete (OP paid)
~~21/6/24~~	
~~21/6/24~~	~~(Echo)~~

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

21/6/24	ECG - (1) (OP paid)		
21/6/24	Echo (slot)		

CBG

21/6/24	CBG - (1) (OP paid)		
21/6/24	CBG - (2) (Both)		
22/6/24			
6am	(Both).		

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

NEBULIZER

ref: Dr: Venkatesh

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Jameena	21/6/24	22/6/2					
	11.30Am						
	8 PM						
Dr. Nayeemuddin	21/6/24						
	@1.00Pm.						

Verified

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Y. Jeya	
BILL CLEARED : No due.	
RETURNS CHECKED : Tot: 1773/-	

Other Procedures : (specify) :-

Verified by
T. Kousalya
22nd
21/6/24

Admission Officer :

Sister In-charge