

BILLING CARDPatient Name Ms. KOKILA ANNAMALAIIP No. 29/Female.MHM202405298Room No. Dr. ARAVINDH

21/06/2024 1PM2024000494

D.O.A. 21/6/24 Time 10pmRent Per Day 2500**TRANSFER DET AILS**

Date	From	To	Sister Signature
21/6/24	11:20pm	Ward III rd Floor (203)	Sanitha 3198
22/6/24	11:30am	ICU	Sanitha 3219
23/6/24	12:30pm	ICU	Sanitha 3219

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

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Surgeon :	Start Time :
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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

20/6/24 CBC - LFT - RFT - Lipase - Amylase (H352) ✓

22/6/24 urine DE (4360) urine Cl (4361)

23/6/24 Endoscopy upper GI (4391) ✓

24/6/24 CBC - RFT Amylase Lipase (4400)

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

21/6/24 ECU (4854)

21/6/24	EU (4833)		
22/6/24	USG abdomen (4373)	for. G. nana saroshuadi	

CBG

CBG

21/6/24	1 (4353)
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PHYSIOTHERAPY

Date _____

NEBULIZER

NEBULIZER

[illegible]