BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Mrs. Davapu Vijay Lakshmi 25/F

D.O.A. 14-9-24 Time 1:22 AM

DOD - 18/9/24

IP No. 468

Room No. single non A/C

Rent Per Day 3000/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
14/9/24	1:30AM	EMR	2nd floor Room/104	Sudha
14/9/24	3:15 AM	R-102	201	Asha

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	:

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect
14/9/24	2:10Am.	10:00am	14/9/24

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 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	LABORATORY

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

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
[redacted]							

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED : Medicine -1698/-	
RETURNS CHECKED : Return -(-) 65/- Kusuma 14/09/24	
16331/-	

Other Procedures : (specify) :-

Admission Officer : [redacted]

Sister In-charge