BILLING CARD

Patient Name MR. AYYAVU D.O.A. 27/6/24 Time 3.12am.

IP No. IPE2024215 17

Room No. G-19 Rent Per Day 1400/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
27/6/24	3.30Am	EMR	ward	

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
27/06/24	1:30Am	27/6/24	3:30Am

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
27/6/24	1:30Am	27/6/24	9 Am

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
27/6/24	(OP routine) - calcium, magnesium ↳ OP Bill no: MMH/MW/DGE/2024 00648 lipide profile

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

27/6/24	CT Brain - (MMH/MW/DGE/2024 00648)

CBG				CBG			
27/6/24	(1)						

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Parthiban	27/6/24 ①	28/6 ①					
Dr. Kannammal	27/6/24 ①	28/6 ①	(No Food).				

PHARMACY	AMBULANCE
OT DRUGS REPLACED : BILL CLEARED : RETURNS CHECKED :	

Other Procedures : (specify) :-

D.O.A 27/6/24 3.30pm
D.O.D 28/6/24 2pm

Admission Officer :

Sister In-charge