BILLING CARD

Patient Name: Mast. Loga Pradeep T. D.O.A. 27/6/24 Time 07:45Am

IP No. 20240000858

Room No. ICU Rent Per Day 4100

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
27/6/24	8:00 am	casualty	ICU	[illegible]
27/6/24	12pm	ICU	CT/CU	S/N [illegible] 2120

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				INFUSION PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
27/6/24	8:30AM	27/6/24	12 pm				

OXYGEN				SYRINGE PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP				VENTILATOR			
Date	Start	Date	Disconnect	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	:

Pomegen.

Date	LABORATORY
27/6/24	CBC, RBS, RFT, Sr. electrolyte, urine complete, Ionized calcium (OPRB202403667), LFT, C.R.P

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

CBG				CBG			
~~CBC~~ 24/6/24	CBC - (1)	· CPKCB20	2403(05)				
1pm	(8281)		(2)				

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

DR. ASHA VALENTINO (Surgery) 27/6

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. Jamuna	27/6/24	IW					
DR. Asha valentine	27/6/24	IW					

Marked

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Total: 4613/- BILL CLEARED : RETURNS CHECKED : No due.	

Other Procedures : (specify) :-

Foley's catheter done on casualty (27/6/24).

27.06.2024 at 3.45

Varified by

Admission Officer :

Sister In-charge