

Ref: Dr. 99

Self discharge on 21/7/24 CA94 PPR MH/DP/2022/104



BILLING CARD

SAFETY FIRST



Patient Name **Mrs. VIMALA A**
 74/Female/MH1202484519
 IP No. **27/06/2024/PH2024001521**
 Room No. **1**
 Dr. G. GNANAVELU



CCU
Ward-5

D.O.A. **27/6/24** Time **13:42**

105-A

TRANSFER DETAILS

Rent Per Day _____

Date	Time	From	To	Nurse's Signature
27/6/24	14:10	ADMISSION	1st Floor R NO-105	[Signature]
28/6/24	13:40	TRANSFER (105A)	CATH LAB	[Signature]
28/6/24	14:45	CATH LAB	7th Floor	[Signature]
29/6/24	12:00	1st Floor	Cath Lab	[Signature]
29/6/24	14:20	CATH LAB	CCU	[Signature]
30/6/24	11:00	CCU	2nd Floor - 105	[Signature]

OPERATION THEATRE

Date	: 28/6/24	OT No.	: CATH LAB - II
Surgeon	: Dr. Gnanavelu. G	Start Time	: 14:05
I Asst. Surgeon	:	End Time	: 14:30
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: R/n. Abinaya	Arthroscopy	:
Name of Surgery	: CA94 PPR	Laprosocopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl : 2ml 10ml/inj. monphi:	:
		Others	:

MONITOR

Date	Start	Date	Disconnect
29/6/24	14:20	30/6/24	11:10

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
29/6/24	14:20	30/6/24	6:00
30/6/24	7:00	30/6/24	11:00

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED

Date	Start	Date	Disconnect

SCD PUMP

Date	Start

VENTILATOR

Date	Start	Date	Disconnect

2,55,000 16,000
DPI + CAB + MIN

OPERATION THEATRE

OPERATION RECORD	
Date : 29/6/2024	OT. No. : Cath Lab - II
Surgeon : DR. Giranavelli	Start Time : 12.05
I Asst. Surgeon :	End Time :
II Asst. Surgeon :	Dis. Pack :
III Asst. Surgeon :	Diathermy :
Anaesthetist :	C-Arm :
OT Nurse : R/N Sathya	Arthroscopy :
Name of Surgery : PPI + TPI	Laproscopey :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

[illegible]

AUCTUS LABS PRIVATE LIMITEDNO.11. OLD NO.5. 1st FLOOR. CORPORATION COLONY MAIN ROAD, RANGARAJAPURAM,
KODAMBAKKAM, CHENNAI - 600024 Ph: 044-48509191
DL NO: 4001/MZII/20B : 4166/MZII/21BState Code : 33
Place Of Supply : TAMILNADU
GSTIN : 33AAMCA2113KIZY**CREDIT-BILL**

To : 686

Bill Date

Bill No & Page No

01/07/2024

AUC/WS349 1/1

Terms

Salesman Name

WHOLE SALES

4-PATIENT

GSTIN

DL NO : N.A

33AABCU3941Q1ZZ

S.No	MFR	Description	PCK	HSN	Batch No.	Exp	Qty	Fr	GST%	GST	Rate	MRP	Amount
1	1 NA	PREMOFIX PM/ICD SET	1	30041010	8220979	09/27	1	0	18 %	350.85	1949.15	2300.00	1949.15
2	1 NA	PG ESSENTIO MRI DR SL111	1	90219090	773680	03/26	1	0	5 %	3838.96	76779.17	80618.13	76779.17
3		INGEVITY PLUS 52CM 7841	1	90189099	1428424	03/26	1	0	18 %	4248.00	23600.00	27848.00	23600.00
4		INGEVITY MRI 59CM	1	30041010	1076696	03/26	1	0	18 %	4248.00	23600.00	27848.00	23600.00
5	1 NA	ACC INTRDCR STD 7FR	1	30049099	GB8589680	08/25	2	0	12 %	566.40	2360.00	2643.20	4720.00

ITEMS : 5 QTY : 6 BASE : 130648.32 SGST : 6626.10 CGST : 6626.10 GST : 13252.21 Goods Value: 130648.32

Category	Gross	CGST	SGST	Amount	P(Disc)	DB	CD	0.00	0.00
5 %	76779.17	1919.48	1919.48	80618.13		CR			
12 %	4720.00	283.20	283.20	5286.40					
18 %	49149.15	4423.42	4423.42	57996.00					
Rounded Net Amount									143901.00

AXIS A/C : 922030011606851 IFSC : UTIB0001165

Amount In Words : One Lakhs Forty Three Thousand Nine Hundred One Rupees Only**Chq in Favour of** AUCTUS LABS PVT LTD

Remarks : P.N-VIMALA-IP-2024001521-DR.GNANA VELU

Customer Outstanding: 104654606.00

For AUCTUS LABS PRIVATE LIMITED

User Name

HARI

AUTHORIZED SIGNATORY