



BILLING CARD

Patient Name B/o. A. Revathi, 1 day / F D.O.A. 28/06/24 Time 7:57 AM

IP No. 303 4505 PT [32-33] PT / LBLW / IUGR DOD: 10/7/24

Room No. NICU

Rent Per Day 10,000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
Direct	NICU	admission	28/6/24 : 8:00 PM	(Signature)

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	:	Laproscopey	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	:
		Others	:

MONITOR

Date	Start	Date	Disconnect
28/6/24	7.50AM	1PM	10/7/24

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
28/6/24	7.50AM	9AM	8/7/24

SYRINGE PUMP

Date	Start	Date	Disconnect
28/6/24	8AM	4/7/24	7:00AM
28/6/24	8AM	4/7/24	10AM

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
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[illegible]

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

28/6/24 Chest X-Ray

CBG

CBG

28/6/24 2 times
 29/6/24 4 times
 30/6/24 3 times
 1/7/24 3 times
 2/7/24 3 times
 3/7/24 2 times
 4/7/24 1 time
 5/7/24 1 time

(21)

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

