

BILLING CARD

2-FLOOR Non A/C

(10)

Patient Name Mrs. MINNALA
47/Female/MIIC202467865
30/06/2024/IPC2024001788
IP No. Dr. SASIKALA
Room No.

D.O.A. 30/06/24 Time 05:58pm

Rent Per Day 1850/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date : <u>01/07/24</u>	OT No. : <u>02</u>
Surgeon : <u>Dr. Sasikala</u>	Start Time : <u>7:15 AM</u>
I Asst. Surgeon : <u>Dr. Valliyammal</u>	End Time : <u>8:30 AM</u>
II Asst. Surgeon : <u>-</u>	Dis. Pack : <u>-</u>
III Asst. Surgeon : <u>-</u>	Diathermy : <u>-</u>
Anaesthetist : <u>Dr. Ravikumal</u>	C-Arm : <u>-</u>
OT Nurse : <u>Rajina</u>	Arthroscopy : <u>-</u>
Name of Surgery : <u>TAH & RSD</u>	Laproscopy : <u>-</u>
<u>Ovarian cyst</u>	Sevoflurane / Isoflurane : <u>-</u>
	Inj. Fentanyl : 2ml 10ml/Inj. Morphine <u>-</u>
	Others : <u>-</u>

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER	
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This image shows a single sheet of white paper with horizontal blue or grey ruling lines. There are two vertical lines on each side, creating margins. A small, dark, curved mark is visible near the top center of the page. The paper appears to be from a notebook or a standard sheet of stationery.

CBG				ABG			ACT
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS
08/7/24	① + ④ + ①						
08/7/24	①						
3/7/24	①						
4/7/24	① + ③						
4/7/24	① + ③ - 202408390						
	① + ③ - 2408410						

[illegible]

NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS
				2/7/24	dressing	(1)	
				4/7/24	dressing	(1)	
				5/7/24	dressing	(1)	