

**BILLING CARD****MH/ PRINT / 0007 / BILL / FO**Patient Name Mr. Rajaraman. ND.O.A 30/6/24 Time 8.00.PmIP No. 2024000875Room No. ICURent Per Day 4100**TRANSFER DETAILS**

Date	Time	From	To	Sister Signature
30/6/24	8.40pm	Casualty	ICU	RCY.

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

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
30/6/24	8.40pm	1/7/24	10AM				

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
30/6/24	8.40pm	1/7/24	10AM				

OXYGEN

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
30/6/24	11pm	1/7/24	2.30am	30/6/24	9pm.	1/7/24	10am
				1/7/24	3am.	1/7/24	10am

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
30/6/24	11pm	1/7/24	2.30am	30/6/24	9pm.	1/7/24	10am
				1/7/24	3am.	1/7/24	10am

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
1/7/24	7.Am	1/7/24	10.30AM	1/7/24	2.30am	1/7/24	10AM

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
1/7/24	7.Am	1/7/24	10.30AM	1/7/24	2.30am	1/7/24	10AM

[illegible]

[illegible]

Heard
A2

AMBULANCE

BILL CLEARED

: Due: - 10722/-

RETURNS CHECKED

∴ Tot: - 12722/-

30/6/24 inj: fenta and amp ① used, ①
1/7/24 @ 3am inj: fenta wml amp ① used ②
1/7/24 intubation done by Dr. Karthikeyan.

Verified by
S/A - Connor
2199
At 10:00

Sister In-charge