

**BILLING CARD**

MH/ PRINT / 0007 / BILL / FO

Patient Name Mr. Rajesh. MD.O.A. 4/7/24 Time 9.45 PMIP No. 2024000892Room No. 204Rent Per Day 2000**TRANSFER DETAILS**

Date	Time	From	To	Sister Signature
4/7/24	10 ³⁹ pm	ICU	2nd floor	R. Vinodhini 2/6/4,

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

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

OPERATION THEATRE

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Date

LABORATORY

4/7/24 Hb. pcv, urine complet, Rft (Lft),
sr. electrolytes ()

5/7/24 platelet, PTNR, APTT (8624)

5/07/24 Blood group & Rh type (8630)

5/7/24 HBAIL (8636) plasma Astone (8635)

2P

Revised

06/07/24

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

4/7/24

ECG

/

CBG

CBG

05/02/24

06/02/24

7pm - 1 (8630)
10pm - 1 (8649)

1pm -

6/7/24

7pm (8649)

7pm (3790)
~~10pm~~

55

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]

AMBULANCE

RETURNS CHECKED :

nodus

05/07/24 - 2 unit FF Tourx fused

Sister In-charge