BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name MR. BABUBUL MONDAL · A D.O.A 9/7/24 Time 11.40am

IP No. 2024000918

Room No. CH(W)M Rent Per Day 1000

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
9/7/24	12.30p	ER	OT	

OPERATION THEATRE

Date	: 9/7/24	OT No.	: 11
Surgeon	: Dr. Alex. M	Start Time	: 1.30PM
I Asst. Surgeon	: –	End Time	: 2.00PM
II Asst. Surgeon	: –	Dis. Pack	: –
III Asst. Surgeon	: –	Diathermy	: –
Anaesthetist	: –	C-Arm	: –
OT Nurse	: Kavitha	Arthroscopy	: –
Name of Surgery	: Tendon repair L/A Block	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

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
9/7/24	CBC, BT, CT, Serology. (20240815) OP

Pr. Sur - Alok
Procedure - 10,000 + 2000

Lab
Verified by
[illegible]

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER			
9/7/24.	~~Chest~~ xray (240/1815) Rt Foot AP, Oblique		(OP) CT - A. Pandiyan 10.07.24
			X-ray - S. [illegible] 10.07.24

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

MMC

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Alex	9/7/24 7PM	10/7/24 11am					
			Verified				
			AB				

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Total : 4815/-	
BILL CLEARED :	
RETURNS CHECKED : No due.	

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge