BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Baby. Aadbisha. D.O.A. 10/7/24 Time 04.27pm.

IP No. 2024000928.

Room No. G/W/F. Rent Per Day 1000/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
10/7/24	4.[illegible]pm.	Casualty	Ward.	[illegible]

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

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
10/7/24	CBC, RFT, Sr Electrolytes, CRP (ERKU20240 1828)
11/7/24	CRP

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

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

MMC

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
	10/7/24	11/7/24	12/7/24				
DR. maheshwara	1Dpm	3.20pm	11.00 Am				
		9.30pm					

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Total : 911 BILL CLEARED : RETURNS CHECKED : No Due.	

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge