

BILLING CARDPatient Name PR child. venbha RD.O.A. 08-07-24 Time 10-20amIP No. IPM2024000554Rent Per Day 750/-Room No. ICU**TRANSFER DET AILS**

Date	Time	From	To	Sister Signature
8/7/24	11am	ER	ICU	S/n pushpalata

OPERATION THEA TRE

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
8/7/24	11.30am	9/7/24	10:am

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 THEA TRE	
Date :	OT. No. :
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Name of Surgery :	Laproscopey :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

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

usg abdomen (4728)

CBG
$$5(4729) + 1(1)$$

22)

PHYSIOTHERAPY

NEBULIZER

