BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Mr. S. Sundar D.O.A. 11/7/24 Time 17:10pm

IP No. 2024080932

Room No. DCU Rent Per Day 4100/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
11/7/24	5:30PM	Casualty	DCU	
13/7/24	8am	ICU	GW	

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
11/7/24	5.45pm	13/7/24	8am.

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
11/7/24	CBC, CRP, RFT, LFT, HbA1c, Sr. electrolytes, RBS, Blood Group & type, ESR, Serology, D-Dimer (OPKB/20240356a)
12/7/24	FBS, electrolytes. [8824]
13/7/24	FBS, electrolytes (8824]

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

11/7/24	ECG - (1) 202403569		
11/7/24	chest x-ray (8805)		

CBG

11/7/24 9pm	- CBG - (1) (202403569) (1) (8824)		
12/7/24 9pm	(10) (2024 3477) (8894)		

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

(Ref :- Marakkayar Ambulance 2000)

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Karthik Raj	11/7/24 I/W	12/7/24 I/W					
Dr Jameena	12/7/24 I/W	13/7/24 U.W	14/7/24 Ph.Dr				
Dr Amirthkumar	11/7/24 I/W						
Dr Balaprakash	12/7/24 I/W						

PHARMACY	AMBULANCE
OT DRUGS REPLACED : V. Injection	
BILL CLEARED : No due.	
RETURNS CHECKED : Tot :- 8379/-	

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge