BILLING CARD

Patient Name Mast. J. Jashwanth Raj D.O.A 28/7/24 Time 12:00 Am

IP No. 2024000976

Room No. 204 Rent Per Day 1500

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
28/7/24	12.30am	GR	IInd floor	

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

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

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III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	:	Arthroscopy	:
Name of Surgery	:	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	:
		Others	:

Date	LABORATORY
29/7/24	Mantoux Test (OP paid) (BRCU20240952) OP Paid.
29/7/24	Gastric - Genexpert (C 0143)
30/7/24	RFT, Electrolytes, CBC, CRP, PS, (9601)
02/08/24	CRP, Blood Group & Rh type, Blood C/S (9736)
~~31/7/24~~	~~Chest x-ray~~ ( )
4/8/24	CBC, CRP, RFT, Electrolytes (9840).
07/08/24	CBC, CRP, ~~RFT~~ LFT (0015)
10/08/24	CRP (10152)

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

2/8/24	Echo (9744.) bed side	
[illegible]	[illegible]	
3/8/24	chest x ray (9784.)	
9/8/24	chest xray (0112) bed side	
10/08/24	CT. chest (IP) - 10155	

CBG

CBG

PHYSIOTHERAPY

Date		
31/07/24	12.30pm	Chest Physiotherapy. (1) 1/8/24

NEBULIZER

3/8/24	neb - (1)	9/8/24 neb - (1)
4/8/24	neb - (1)	10/8/24 neb - (1)
5/8/24	neb - (1)	11/8/24 - (1)
6/8/24	neb - (1)	
7/8/24	neb - (1)	
8/8/24	neb - (1)	

05/08/24

NEBULIZER

12/8/24	neb - (1)	(11)

Ref:- Dr. Subhashini

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Maheshwaran.	28/7/24	29/07/24	30/7/24	31/07/24	1/8/24	02/08/24	3/8/24
morning	9.00AM	9AM		10 am	12 Noon	10AM	@ 8.30AM
Evening	11.30P~	2PM	2PM				
Night		10PM	10PM	9pm	10 PM	10 PM	9PM
Dr. Subhashini	28/7	29/7	30/7/24	31/7	1/8	3/8/24 (W)	2/8/24 Phone
DR. Mahashwam.	4/8/24 12PM @10.00pm.	5/8/24 @4.30Pm @ 10.30Pm	6/8/24 @ 2.00Pm @ 10.30Pm	02/08/24 3PM 11.30 Pm	8/8/24 10AM 10.00Pm	9/8/24 9 AM @ 10.30 pm	10/08/24 10.30 (11/8/24 10.30Pm
Dr. Subashini	3/8/24 (W) 10/8/24	4/8/24 (W) 10/8/24 (W.)	5/8/24 (W)	6/8/24	02/8/24 3PM	8/8/24 10.30P.	9/8/24 10am 10Pm

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED :	
RETURNS CHECKED :	

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge

BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Mst. Jashwantbhai

D.O.A. _____ Time _____

IP No. 976.

Room No. _____ Rent Per Day _____

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MONITOR

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Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

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ALPHA BED / SCD PUMP

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Date	LABORATORY

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

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. mahaswaran.	11/8/24 11am ✓	12/8/24 @ 2.30pm ✓					
	9pm. ✓						
Dr. Subashini (Phone calls)	12/8/24 @ 4.00pm ✓						
				Verified AB			

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Nil	
BILL CLEARED : TOTAL - 37449	
RETURNS CHECKED : nodues.	

Other Procedures : (specify) :-

→ verified by V. Thajavan

Admission Officer :

Sister In-charge