

**BILLING CARD****MH/ PRINT / 0007 / BILL / FO**Patient Name P/O. Swathi. MD.O.A. 28/7/24 Time 4:00pmIP No. 2024001980Room No. NICURent Per Day 4100**TRANSFER DETAILS**

Date	Time	From	To	Sister Signature
28/7/24	2pm	Direct admission	NICU	S/N J. Jayaram 2186
21/7/24	10am	NICU	2nd floor	Sir. Madh. Saje.

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**INFUSION PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
28/7/24	2pm	21/7/24	10am				

OXYGEN**SYRINGE PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
28/7/24	2pm	28/7/24	6pm	28/7/24	2pm	30/7/24	6am

ALPHA BED / SCD PUMP**VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEATRE	
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Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

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

28/7/24 chest x-ray bedside (9509)

CBG

CBG

28/7/24

CBG-2 (9509)

31/07/24

6pm-1 (9668)

29/7/24

CBG-2 (9533)

CBG-2 (9563)

30/7/24

CBG-2 (9593)

CBG-2 (9611)

31/7/24

CBG-2 (9627)

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

Ref: DR. DHARANI (May/June)

[illegible]