BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Child. Mugundha Krishnan. D.O.A. 29/07/24 Time 8.30 pm

IP No. 2024000985

Room No. GWM. Rent Per Day 1000 /-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
29/7/24	8.50pm	ER	Gward	

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

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

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

30/7/24 Neb-(3) ~~31/7/24~~

31/7/24 Neb-(1)

NEBULIZER

Dr. Manivannan referral.

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. maheshwaran (paed)	29.7.24 9.30pm	30/7/24 3pm 10pm	31/7/24				

PHARMACY	AMBULANCE
OT DRUGS REPLACED : V. Jayasri.	
BILL CLEARED : No due.	
RETURNS CHECKED : TOT: 3364/-	

Other Procedures : (specify) :-

Admission Officer : Ruby S.

31/7/24 @ 9am

Sister in-charge