



BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name

Baby. SULTHAN YUNUS Y A

2: Male / MHM202406093

02/08/2024 / 1PM2024060642

IP No.

Dr. DHANASEKHAR K

Room No.



D.O.A. 02/08/24 Time 4.20 PM

Rent Per Day 1500/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
2/8/24	5 PM	ER	3rd floor (309)	U. Suf / 25/1/24

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

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

Date

LABORATORY

02/8/24 ✓ ✓ ✓ CBC, CRP, Dengue a/s, (EPPA) (5431)

2/8/24 ✓ Urea a/s, (5433)

2/8/24 ✓ Blood g/s (5434)

[illegible]