

**BILLING CARD**

Cath DGD - 25/08/24

MH/ PRINT / 0007 / BILL / FO

Patient Name A. Vana Lakshmi 55y/fIP No. 412D.O.A. 23/08/24 Time 9:47 pm

Δ:- General weakness

Room No. Single Room New 4/cRent Per Day 3000/-**TRANSFER DETAILS**

Date	Time	From	To	Sister Signature
23/8/24	10:20pm	ICU R	102 Room -	Uma - 0048

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	:	Laproscopey	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	:
		Others	:

MONITOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
23/8/24	11 PM	25/8/24	1:15pm				

INFUSION PUMP**OXYGEN**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
				24/8/24	1:30pm	25/8/24	1:15pm

SYRINGE PUMP**ALPHA BED / SCD PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

VENTILATOR

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 :	Laproscopey :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date

LABORATORY

24/8/24 potassium, Thyroid Profile
 25/8/24 urine Routine and microscopy

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

24/8/24 ECG.
24/8/24 Echo (Paid By patient)

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

