

Insurance



BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Mohammad Zaem Bashree

D.O.A. 04/8/24 Time 9pm

IP No. 2024000

Baby. MUHAMMAD ZAEEM BASH

0/Male/MHM202406138

04/08/2024/1PM2024000653

Dr. AIYSHA BEEVI

Room No. _____

Rent Per Day 1500/-

Date	Time	Fl.		Sister Signature
4/8/24	9.30pm	ER	3rd floor 308	Sandhya 3128

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

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LABORATORY

[illegible]

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

5/8/24 USG Abdomen and pelvis / note by Dr. Armana (55/6) Salaswa

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

