

Ref Dr. Harsh

SECI²
Discharge on 9/8/24

M.M
MHI/DP/2022/104



BILLING CARD
SAFETY FIRST



Patient Name Mrs. MUTHULAKSHMI V
52/Female MHI202485124
05/08/2024/1P112024001799
IP No. Dr. G. GNANAVELU
Room No. 

D.O.A. Slm Time 1.20 p
Ward - 50
TRANSFER DETAILS Rent Per Day 201/B

Date	Time	From	To	Nurse's Signature
5/8/24	14.00	ADMISSION	201(A) 4nd floor	

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 : 2ml 10ml/inj. monphi:
	Others :

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

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[illegible]

