RT 1:30 pm 16/8/24

BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Mr. Gopal pK

D.O.A. 14-08-24 Time 10 am

IP No. IpM2024000

Room No. _____

Rent Per Day 4000/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
14/8/24	11AM	ER	ICU (3rd Floor)	Shanty B224
14/8				

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
14/8/24	CBC, CRP, BT, LT, HbA1c, Dengue profile (Elfa)
	Dengue IgG, Dengue IgM, Dengue NS1 (5696)
	Blood c/s, Urine c/s, (5698) Urine Routine (5697)
15/8/24	CBC - (5739)
16/8/24	Lipid profile, urea, uric acid, CBC (5733)

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

14/8/24	ECG (5703)		
14/8/24	chest xray (5703)		
14/8/24	usg abdomen (5704)	Dr. Gnanasoundaswathi	

CBG

15/8/24	CBG		
CBG	3 (5781)		
16/8/24	1 (5779)		

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. Vaishnavi S	14/8/24	15/8/24	16/8/24				

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Total Sale: 2602/-	
BILL CLEARED : Cash paid.	
RETURNS CHECKED : Refund Rs. 1474/- BJ 16/7.	

Other Procedures : (specify) :-

Admission Officer : 3052

3198
Sister In-charge