



BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name MRS. SITHA

D.O.A. 17/18/24 Time 18.00pm

IP No. IPE2024000247

Room No. 213

Rent Per Day 1680 / Day.

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
17/18/24	8.30am	OP	EMR	<i>[Signature]</i>
17/18/24	12.00pm	EMR	ward	Thamarai
19/18/24	2pm	ward	OT	Kaviyaye
19/18/24	4.30pm	OT	ICU	Kaviraj.R
19/18/24	8pm	ICU	ward	<i>[Signature]</i>

OPERATION THEATRE

Date	: 19/08/24	OT No.	: T1nd
Surgeon	: Dr. Sathya Velan	Start Time	: 2.35pm
I Asst. Surgeon	: Dr. Vidhya Saranyan	End Time	: 4pm
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	: Dr. Rajeshwarar / Pashika	C-Arm	:
OT Nurse	: Mr. Perthiban	Arthroscopy	:
Name of Surgery	: Lap cholecystectomy	Laproscopy	: Yes (1 1/2 hours)
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	:
		Others	:

MONITOR

Date	Start	Date	Disconnect
19/18/24	4.30pm	19/18/24	8pm

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
19/18/24	4.30pm	19/18/24	8pm
19/18/24	8pm	20/18/24	8pm

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

[illegible]

1718124

CBC, RBS, RFT, LFT, Amylase, Lipase, Urine R/E
Bill NO mmH/MV/DUE 202400996

2018124	Bio Psy
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[illegible]

