BILLING CARD

11:00AM

MH/ PRINT / 0007 / BILL / FO

Patient Name Child. Haran Krish D.O.A. 19-08-24 Time 10.30am

IP No. IPM2024000714

Room No. 309 Rent Per Day 1500/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
19/8/24	11.30 am	ER	IIIrd floor 309	R. Pandidr 3201
20/8/24	7Am	3rd floor (309)	3rd floor (307)	H. [illegible]/0547

OPERATION THEATRE

Date :	OT No. :
Surgeon :	Start Time :
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				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

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
19/8/24.	• CBC, • CRP [5882] Typhi Thyboid Igm, • Swabe Thypis Igm, [5883]
	• Dengue NS1 }
	• Dengue Igm } ELISA 5884
19/8/24.	• Dengue Igg
	• Urea, • Creatine, • Na+, • K+, • SGOT, • SGPT, [5885]
19/8/24	Blood C/S [5886] Urine • C/S [5890] • Urine (R) • Lepto Igm [58
20/8/24	• LFT. [5927]

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

25/8/24	• Chest x-ray (5906)	
23/8/24	• Chest x-Ray (5980)	

CBG

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. Narayanan	19/8/24	20/8/24	20/8/24	21/8/24	22/8/24	22/8/24	23/8/24

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED :	
RETURNS CHECKED :	

Other Procedures : (specify) :-

Admission Officer : 3052

M. Mary @ Vasanthi 3104
Sister In-charge