



BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name B/o. Narmadha

IP No. IPE2024000246

Room No. _____

R.O. NARMADHA

Female M/H/2024/1983

19-08-2024 IPE 2024000246

D. P. VINODHINI



D.O.A. 19/8/24 Time 01:49pm

Rent Per Day _____

Date	Time	From	To	Sister Signature
19/8/24	12:50pm	OT	Warner (NICU)	ingrimy
19/8/24	2:00pm	NCCU [Warner]	ward	fern

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

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
19/8/24	12:50pm	19/8/24	2:00pm				

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEATRE

Date :	OT. No.	PUSPANK KADUR
Surgeon :	Start Time	G Female/MHF/202421983
I Asst. Surgeon :	End Time	19-08-2024_HPL2624066246
II Asst. Surgeon :	Dis. Pack	Dr.P.VINODHINI
III Asst. Surgeon :	Diathermy :	
Anaesthetist :	C-Arm :	
OT Nurse :	Arthroscopy :	
Name of Surgery :	Laproscopy :	
	Sevoflurane / Isoflurane :	
	Inj. Fentanyl :	
	Others :	

LABORATORY

[illegible]

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

B. U. SAK MADHA
6 Female/MHF-2024/1983
19-08-2024 (PL-2024060246)

Dr. P. VISODHINI



CBG

19/8/24 2 + ③

20/8/24 ③ + ①

21/8/24 ①

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

