11:00 AM

BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name: Master.SULTHAN IBRAHIM M A
4'Male MHM202406427
19/08 2024 IPM2024000715
Dr.DHANASEKHAR K

D.O.A. 19/8/24 Time 5.00P

IP No. _____

Rent Per Day 1500/-

Room No. _____

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
19/8/24	6. Pm	ER	3rd floor (309)	M. Sheef/254

OPERATION THEATRE

Date :
Surgeon :
I Asst. Surgeon :
II Asst. Surgeon :
III Asst. Surgeon :
Anaesthetist :
OT Nurse :
Name of Surgery :

OT No. :
Start Time :
End Time :
Dis. Pack :
Diathermy :
C-Arm :
Arthroscopy :
Laproscopy :
Sevoflurane / Isoflurane :
Inj. Fentanyl :
Others :

MONITOR

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Discon

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Discon

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disco

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, Dengue NS1 (ELFA) ✓ (5889)
	Blood C/S Urine C/S
21/8/24	LBC / LFT (5933)
22/8/24	CBC (5956)
23/8/24	Platelet (5979)

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

20/8/24	Chest x-ray (5919)		

CBG

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Dhanarekar	20/8/24	20/8/24	21/8/24	22/8/24			

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

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge