Mrs.FASILA
37 Female MHF202421992
20/08/2024 IPL2024000248
Dr.VIDHYA CHARANYAN

# BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name MRS. FASILA D.O.A. 20/8/24 Time 12.00 PM

IP No. 2024000248

Room No. 214 Rent Per Day 1400/-

## TRANSFER DETAILS

| Date | Time | From | To | Sister Signature |
|---|---|---|---|---|
| 20/8/24 | 9.40AM | OP | EMR | |
| 20/8/24 | 12.00PM | EMR | Ward | |
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## OPERATION THEATRE

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|---|---|---|---|
| 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 |
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## INFUSION PUMP

| Date | Start | Date | Disconnect |
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## OXYGEN

| Date | Start | Date | Disconnect |
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## SYRINGE PUMP

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## ALPHA BED / SCD PUMP

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## VENTILATOR

| Date | Start | Date | Disconnect |
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## OPERATION THEATRE

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|---|---|---|---|
| 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 |
|---|---|
| 20/8/24 | IP routine [CBC, UREA, CREATININE, RBS, ESR, ELECTROLYES, HIV I&II-CARD, HBSAG-CARD] |

| RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER | | | |
|---|---|---|---|
| 20/8/24 | CT Brain & Facial [ECG CXR] | MMH/MN | DAE 20240101015 (OP Paid) |
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| Date | PHYSIOTHERAPY |
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| NEBULIZER | | | | NEBULIZER | | | |
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| CONSULTANT NAME | Date | Date | Date | Date | Date | Date | Date |
|---|---|---|---|---|---|---|---|
| Dr. Parthiban | 20/8/24 ①+① | 21/8/24 ① | | | | | |
| Dr. mohankumar | 20/8/24 ① | | | | | | |
| Dr. vithiya Charaniyan | 20/8/24 ① | | | | | | |

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

Other Procedures : (specify) :-

D.O.A : 20/8/24

D.O.D : 21/8/24

Admission Officer :

Sister In-charge