23 AUG 2024

Mr.SATHISH
31/Male/MIIV202404191
22/08/2024/IPV2024000731
Dr.K.GAYATHRI MD

BILLING CARD

MH/ PRINT / 0007 / BILL / FO

23 AUG 2024

Patient Name

IP No.

D.O.A. 22/8/24 Time 6.45 AM

Room No. IW-I3 Rent Per Day 3500/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
22/8/24	6:30 Am	ER	ICU	SIN 0128

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

Date	Start	Date	Disconnect
22/8/24	6:40 AM	23/8/24	3.30pm

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

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
22/8/24	RBS, BT CT, Sr. LYPASE, Sr. AMYLASE, BLOOD GLT.
	HIV-I-II CARD, ANTI-HCV CARD, HBsAg CARD (5089).
22/8/24	HBA1C [5095] URINE ROUTINE (5097)

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER			
22/8/24	USG ABDOMEN (5103) DR. ~~AARTHI~~		

CBG				CBG			
22/8/24	1 +1+1+1 +1+1						
23/8/24	1+1						

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. GAYATHRI [MD]	22/8/24 @ 10AM	@ 10.45Am 23/8/24					
DR. DEEPU	@ 9am 22/8/24						

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

Other Procedures : (specify) :-

RYLESTUBE INSERTION DONE ICU ON 22/8/24 @ 10.am

STOMACH WASH GIVEN 22/8/24

Admission Officer :	Sister In-charge