BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Child. Shriseevasasthik. D.O.A. 22/8/24 Time 7.45pm.

IP No. DPUB2024001077.

Room No. 203. Rent Per Day 2000/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
22/8/24	8.45 PM	casualty	2nd Floor	

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

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
25/8/24	~~CRP, Platelet~~ (10805)

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

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

Dr. Manivannan Referral.

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. maheshwaran	22/08/24	23/8/24	24/8/24	25/8/24	26/8/24	28/8/24	
morning		3.30pm	9pm	1PM	2.10 pm		
Evening	10PM	3.0pm	11.30PM	9PM	11.30 pm		
Dr. Saraga sivi	27/8/24 10 AM						
	10PM						

PHARMACY		AMBULANCE
OT DRUGS REPLACED	: V. Jeyasri	
BILL CLEARED	: No due.	
RETURNS CHECKED	: Tot:- 4406/-	

Other Procedures : (specify) :-

Verified by
B. Harini
28/8/24

Admission Officer :

Sister In-charge