BILLING CARD

MH/ PRINT / 0007 / BILL / FO

DOD:- 9/9/24

Patient Name D/O. Thotakura Visalakshi Twin-2 D.O.A: 31-8-24 Time 8:09 PM

IP No. 435

Room No. NICU Rent Per Day 10,000/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
31/8/24	8:00PM	NICU Direct admission		Ramya.
6/9/24	7:00PM	single room		Kumari

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
31/8/24	10 Am	6/9/24 12 PM	12 PM

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
31/8/24	8 Pm	1/9/24	07 Am
1/9/24	12 Am	1/9/24	6 Am

SYRINGE PUMP

Date	Start	Date	Disconnect
1/9/24	06:00PM	1/9/24	

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
1/9/24	CBC, CRP, Calcium, BGT
3/9/24	CBC, CRP, Electrolytes, Blood urea, Bilirubin.
5/9/24.	CBC, CRP, Bilirubin.

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

3/8/24	Chest x-Ray		

CBG

3/8/24	1.		
1/9/24	4.		
2/9/24	3		
3/9/24	2.		
4/9/24	0-1		

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Ravi Angara.	31/8/24	1/9/24	2/9/24	3/9/24	4/9/24	5/9/24	6/9/24
	7/9/24	8/9/24	9/9/24				

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Med-12974 Nagalakshmi -0098 2/9/24	
BILL CLEARED :	
RETURNS CHECKED :	

Other Procedures : (specify) :-

Ubical line line - 1/9/24.

Photo therapy single start - 3/9/24 - 8pm - stop - 4/9/24 - 7pm

Admission Officer : Attu

K. Ramya 88
Sister In-charge