Cash

BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name: A.V. Ramanamma

D.O.A. 02/09/24 Time 08:21Pm

IP No. 439

DOD - 5/9/24

Room No. Single Room A/C

Rent Per Day 4000/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
2/9/24	9:40PM	EMR	202-ROOM	D Tulasi (6015)

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
2/9/24	9. 50PM	5/09/24.	7: 40Pm.

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
2/9/24	9. 50PM	3/9/24	7Am.

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	:

LABORATORY

Date	
2/9/24	Serum. TROPONIN

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

4/9/24	2D Echo		

CBG

3/9/24	1	1	1
4/9/24	1	1	1
5/9/24	1	1	1

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

3/9/24	1	1	1
4/9/24	1	1	1
5/9/24	1	1	1

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Subba Rao Sir	3/9/24	4/9/24	5/9/24.				
Dr. Ramya mam	3/9/24	4/9/24	5/9/24.				

PHARMACY	AMBULANCE
OT DRUGS REPLACED : —	
BILL CLEARED : Medicine - 8692/-	
RETURNS CHECKED : Returns - 796/-	
Total → Rs 7,896/-	

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge