

7

I-Floor Non #12



BILLING CARD

Patient Name **Mrs.PAPPITHA.R**
24/Female/MIIC202473000
IP No. 05/09/2024/IPC2024002410
Room No. Dr.VALLIAMMAL K

CASH

D.O.A. 5/09/24 Time 03:25pm

Rent Per Day 1850/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature
6/9/24.	1 pm	R.no: 7	Labour room	P. Raju
	4:57pm	Labour room	R.no: 7	

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 :
Normal delivery 6/9/24 at 2.40pm	
Dr. Valliammal, Dr. P. Raju, Dr. S. S. K. K. K.	
Sevoflurane / Isoflurane :	
Inj. Fentanyl : 2ml 10ml/Inj. Morphine	
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

Date	Start	Date	Disconnect

SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

[illegible]

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Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date

LABORATORY

5/10/24

HB, BT, CT, RBS - ALLIOTS.

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

5/9/24	CTG	due	Dr. Manohar
5.9.24	Echo - 2024/1602	due	Dr. Manohar

[illegible]