

**BILLING CARD****MH/ PRINT / 0007 / BILL / FO**Patient Name Baby- MOHAMMED AFFAN SAIT.MD.O.A. 17/11/24 Time 21:00pmIP No. 2024001199Room No. 214/1Rent Per Day 1500**TRANSFER DETAILS**

Date	Time	From	To	Sister Signature
17/11/24	920pm	Casualty	2nd floor	Dnyan

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**INFUSION PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OXYGEN**SYRINGE PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP**VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

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

18/9/24 ~~Case Complete (11848)~~

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]

Verf. Ad
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10/2.

PHARMACY	AMBULANCE
OT DRUGS REPLACED : <i>Off-line</i> BILL CLEARED : <i>TOTAL - 7399/-</i> RETURNS CHECKED : <i>No due 1/-</i>	

Other Procedures : (specify) :-

verf. 20/9/dec 2008

Admission Officer :

Sister In-charge