

**BILLING CARD****MH/ PRINT / 0007 / BILL / FO**Patient Name Maste - GURV Saran. VD.O.A. 6/9/24 Time 9:30amIP No. 2024001141Room No. 207Rent Per Day 9000**TRANSFER DETAILS**

Date	Time	From	To	Sister Signature
6/9/24	9:30am	Casualty	2nd floor	S. m. l.
06/09/24		2nd floor	OT	
06/09/24	2-15 pm	OT	PICU - 2nd floor	S. P. S. S. S.
6/9/24	4 pm	PICU	2nd floor	S. P. S. S. S.

OPERATION THEATRE

Date :	6/9/24	OT No. :	2nd OT
Surgeon :	Dr. Vigneshwaran	Start Time :	1:30 PM
I Asst. Surgeon :	-	End Time :	2:30 PM
II Asst. Surgeon :	-	Dis. Pack :	
III Asst. Surgeon :	-	Diathermy :	used 5 min
Anaesthetist :	Dr. Jamuna & Dr. A	C-Arm :	-
OT Nurse :	Karthikeya	Arthroscopy :	-
Name of Surgery :	Circumcision	Laproscopy :	-
		Sevoflurane / Isoflurane :	-
		Inj. Fentanyl :	
		Others :	My Ketamine 2 used

MONITOR

Date	Start	Date	Disconnect
6/9/24	2:15pm	6/9/24	4pm

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 :

[illegible]

[illegible]**CBG**

(11361)

PHYSIOTHERAPY

NEBULIZER

