Cash

BILLING CARD

MH/ PRINT / 0007 / BILL / FO

DOD:- 14/9/24

Patient Name B/o. A. Praneela

D.O.A. 09/09/24 Time 10:39 AM

IP No. 452

Room No. NICU

Rent Per Day 10,000

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
9/9/24	10 AM	Direct Admission	NICU	Anitha

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

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
9/9/24	10AM	10/9/24	7AM

SYRINGE PUMP

Date	Start	Date	Disconnect
9/9/24	10AM	10/9/24 AM	11AM

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
9/9/24	CBC, CRP, calcium, BGT
11/9/24	CBC, CRP, electrolytes, Blood urea, Bilubin
12/9/24	Bilurubin
13/9/24	Bilurubin, CBC, CRP.

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

CBG

9/9/24	3		
10/9/24	3		
11/9/24	2		
12/9/24	1		

CBG

Date	PHYSIOTHERAPY

NEBULIZER

12/9/24	1		

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. A. Ravi Sir	9/9/24	10/9/24	11/9/24	12/9/24	13/9/24	14/9/24	

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED : Medicine - 6,007/- 14/09/24	
RETURNS CHECKED :	

Other Procedures : (specify) :-

phototherapy 12/9/24 10Am start

phototherapy 13/9/24 10Am STOP

Room shifting 13/9/24 at 12Pm

Admission Officer

Sister In-charge