

**BILLING CARD**

MH/ PRINT / 0007 / BILL / FO

Patient Name Mrs. Afrin nisha . MD.O.A. 9/9/24 Time 8:30 pmIP No. IPKB 2024001159Room No. 215Rent Per Day 1500 /-**TRANSFER DETAILS**

Date	Time	From	To	Sister Signature
9/9/24	11:45 pm	Cenwally	2nd floor	P. Vinodhini 2164

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
10/9/24	6am	11/9/24	@6:00am

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

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	Inj. Fentanyl :
	Others :

LABORATORY

Date	
9/9/24	CBC, CRP, LFT, RFT, Sr. electrolytes, EBS ESP, Sr. electrolytes, BT-CT (11460.)
10/09/24	ESP PRBS [11539] ^{HbA1c}

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

11/9/24

USOT screening ~~Medway Hospital~~

CBG

CBG

10/09/24

6cm - 1

14cm - 1 (11.5000)

(2)

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

I may vary in

Sister In-charge