

II Floor

Single Room

Non AC DAD - 2/10/24 12:34 PM

52

DOA - 1/10/24 12:34 PM

BILLING CARD

Patient Name Master.KAMALESH

D.O.A. 01.10.24 Time 12:34 PM

IP No. 01.10/2024/IPC/2024002718

Room No. Dr.SANKARLINGAM

Rent Per Day 1850/-



TRANSFER DETAILS

Date	In	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 01/10/24	OT No.	: 01
Surgeon	: DR. Sankarlingam	Start Time	: 9.00 PM
I Asst. Surgeon	: -	End Time	: 9.30 PM
II Asst. Surgeon	: -	Dis. Pack	: -
III Asst. Surgeon	: -	Diathermy	: -
Anaesthetist	: DR. Ravikumari	C-Arm	: -
OT Nurse	: Regina	Arthroscopy	: -
Name of Surgery	: Circumcision	Laproscopy	: -
		Sevoflurane / Isoflurane	: -
		Inj. Fentanyl	: 2ml / 10ml / Inj. Morphine ①
		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

[illegible]

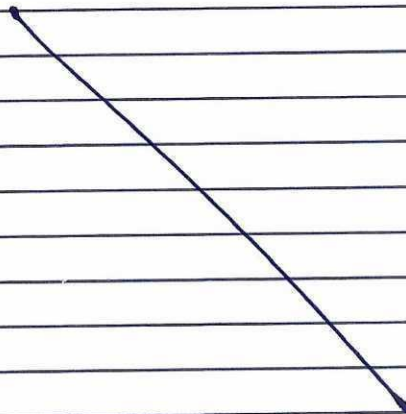
OPERATION THEATRE

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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

1/10/24 CBC, BT, CT, Blood grouping => 2234



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

01/10/24	Chesr 800	Due	860 $\Rightarrow$ 2276
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[illegible]

Date _____

PHYSIOTHERAPY

[illegible]