BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Master. Guhan. R D.O.A. 12/9/24 Time 10:40am

IP No. 2024100116 9

Room No. 204 Rent Per Day 2000

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
12/9/24	11.20am	ER	IInd Floor	PD2220.

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

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	:

Date	LABORATORY
2/9/24	CBC, CRP, RFT, & electrolytes, ESR (20/4/22 C2) OP paid

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

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

Ref: Dr. Balaji (MAYILADUTHURAI)

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. Maheshwaran	12/9/24	13/9/24	14/9/24				
Morning	11 4 pm	10 3 pm	5.55				
	10pm	10pm.					
Dr. Subashini	12/9/24	13/9/24					

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Nil	
BILL CLEARED : total 5780	
RETURNS CHECKED : no due	

Other Procedures : (specify) :-

verified by
B. Harini
18:8pm 14/9/24

Admission Officer :

Sister In-charge