BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Mr. Gothandaraman D.O.A. 13/09/24 Time 9:30PM

IP No. 2024000305

Room No. ICU → 208 Rent Per Day 1400/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
13/09/24	9.30PM	EMR	ICU	Sevitha. P.
15/9/24	12.30pm	ICU	Ward-208	

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
13/09/24	9.30pm	15/9/24	12:30pm

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
13/09/24	CBC, RFT, SR. Electrolytes, HIV, HCV, HBSAg ESR, RBS

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

13/09/24	CT - Brain / Facial.		
13/9/24	X-ray Chest		

CBG

14/9/24	(1)+(1)						
15/9/24	(1)						

CBG

PHYSIOTHERAPY

Date	

NEBULIZER Dressing.

16/9/24	(1).		

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Parthiban Anand	13/09/24 ①	15/9/24 ①	16/9/24 ①				
DR. Raghul	14/9/24 ①						
Dr. Manikandan	13/9/24 ①						
Dr. Parthasarathy Anand	14/9/24 ①						
Dr. Gladson	14/9/24 ①	15/9/24 ①					

PHARMACY	AMBULANCE
OT DRUGS REPLACED : BILL CLEARED : RETURNS CHECKED :	

Other Procedures : (specify) :-

→ Pt. Dressing done by yogesh.

D.O.A: 13/9/24.
D.O.D: 16/9/24

[illegible] NS.

Admission Officer :

Sister In-charge