17 SEP 2024

MH/ PRINT / 0007 / BILL / FO

Mrs.KASTHURI
65/Female/MHV202404638
15/09/2024/IPV2024000846
Dr.RAJA

BILLING CARD

17 SEP 2024 D.O.A. 15/09/24 Time 1.00 Pm

Room No. Single Room Non AC 316 Rent Per Day 1,400/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
15/09/24	1:10pm	ER	Ward	S/N
15/9/24	11pm	316 (NON AC	311 (Non AC)	S/N Vincy 0128

OPERATION THEA TRE

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 THEA TRE

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
15/9/24	Peripheral Smear (5801)
16/9/24	Stool occult Blood (5809), Folic acid, Vit B12 (583
17/9/24	TSH (5855))

RADIOLOGY - ECG / ECHO / X-RA Y / USG / CT / MRI / DRP / BIO-DOPPLER			
16/9/24	USG Abdomen (5837) DR. Siram		
16/9/24	Cxray PA View (5834)		
16/9/24	2D Echo ~~screening~~ (5841)		
	[illegible] Dr. Karthikeyan (Card)		

CBG				CBG			
16/9/24	1						
17/9/24	1						

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. Gayathri (MD)	@ 10.10am 16/9/24	@ 10.30am 17/9/24.					

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

Other Procedures : (specify) :-

Admission Officer : RG 16/09/24

Sister In-charge