

I Floor

ICU

DOA: 17/9/24 at 3:06 PM

DOD: 18/9/24 at 6 PM

BILLING CARDPatient Name Mrs. RAJESHWARID.O.A. 17.9.24 Time 03:06 PMIP No. 29/Female/MIIC20247407517/09/2024/TPC2024002545Room No. Dr. ARTIIIRent Per Day 4900**TRANSFER DETAILS**

Date	Time	From	To	Nurse's Signature

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 : 2ml 10ml/Inj. Morphine
	Others :

MONITOR**INFUSION PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
17/9/24	4 PM	18/9/24	11 AM				

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

Date :	OT. No. :
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III Asst. Surgeon :	Diathermy :
Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date

LABORATORY

17/9/24 CBC, Urea, Creatinine, Electrolytes, LFT, RBS ⇒ 1602

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

[illegible][illegible][illegible][illegible]



Medway JSP Hospitals
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FINAL BILL		
Name : Mrs.RAJESHWARI		
Age / Sex : 29 / FEMALE		IP Number : IPC2024002545
Doctor Name: DR.GRIDHARAN.,MS.,MCH.,(NEURO SURG)		D.O.A. :17/09/2024
Company Name: INTIMATE FASHION		D.O.D. :18/09/2024
Emp. ID : 30821		
S.No	Description	Value
1	REGISTRATION CHARGES	500
2	ICU CHARGES (4900* 1.5 DAYS)	7350
3	NURSING CHARGE (250* 1.5 DAYS)	375
4	MONITER CHARGES (1250*0.5DAY)	625
5	ECG CHARGES	300
6	LAB CHARGES	2374
7	X RAY CHARGES 1 Nos	500
8	CT FACIAL BONE CHARGES	4500
9	CT BRAIN CHARGES	2000
10	USG ABDOMEN CHARGES	2000
11	DISINFECTION CHARGES	200
12	MRD CHARGES	200
13	DRUGS CHARGES	2594
14	DR.GRIDHARAN.,MS.,MCH.,(NEURO SURG)	1000
15	INTENVISIT CHARGES (1500*1.5DAYS)	2250
16	DIETITIAN CHARGES	500
Bill Amount		27268
MOU Discount 10 %		2726.8
Final Bill Value		24541
Rupees : Twenty Four Thousand Five Hundred and Forty One Only		
Rs. 24,541/-		
Insurance department		

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