



BILLING CARD

MH/ PRINT / 0007 / BILL / FO

D.O.D. 23/9/24

D.O.A. 19/9/24 Time 11:45pm

Patient Name Velanti, BabyIP No. 482Room No. Female glw

D.Sis: (Lt) HipH

Rent Per Day _____

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
20/9/24	12:10AM	EMR	FLW	D.T. Wani 0045
20/9/24	1PM	ROOM	SICU	Lakshmi
20/9/24	4:45PM	SICU	OT	Sandhya
20/9/24	6:15PM	OT	SICU	Mai 0003
21/9/24	12:20PM	SICU	Room at 106	Kumari 0011

OPERATION THEATRE

Date :	20/9/24	OT No. :	1
Surgeon :	Dr. Arun	Start Time :	5pm
I Asst. Surgeon :	-	End Time :	6:15PM
II Asst. Surgeon :	-	Dis. Pack :	-
III Asst. Surgeon :	-	Diathermy :	5:10pm to 5:30pm
Anaesthetist :	Dr. Kusuma	C-Arm :	-
OT Nurse :	Devi	Arthroscopy :	-
Name of Surgery :	(L) Amp	Laproscopy :	-
		Sevoflurane / Isoflurane :	-
		Inj. Fentanyl :	-
		Others :	-

MONITOR

Date	Start	Date	Disconnect
20/9/24	1PM	20/9/24	4:30pm
20/9/24	6:30pm	21/9/24	12pm

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
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[illegible]

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

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

