

I floor cardie

9

BILLING CARD

Patient Name **B/O.MANJULA.D**
D. Female: MIIC202474507
IP No. 22.09/2024/IPC2024002619
Room No. Dr. ARAVINDH RAJHA P.S

D.O.A. 22/9/24 Time 2:21pm

Rent Per Day No Rent /-

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 :	Laproscopey :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl : 2ml 10ml/Inj. Morphine
	Others :

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

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]

PHARMACY		AMBULANCE	
OT DRUGS REPLACED :	Nil N/C		Nil
BILL CLEARED :			
RETURNS CHECKED :	M. Prigulca		

CROSS MATCHING :

RESERVATION OF BLOOD :

STERILE TRAY USED :

TRANFUSION (BLOOD)

ATTENDER'S HOLDING :

OTHER PROCUDURES: Singal PHOTOTHERAPY START: 11:30am TO 26/09/24 at 10am

Admission Officer :

Sister In-charge

OPERATION THEATRE	
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Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

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

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