Cash

BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Dt: - 25/9/24

Patient Name B/O.M.SOWJANYA

D.O.A. 23/09/24 Time 7:15 PM

IP No. 494

Room No. ~~[illegible]~~ Double phototherapy

Rent Per Day

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
23/9/24	9:15 PM	Direct	NICU (phototherapy purpose)	Kumari

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
23/9/24	[illegible]		

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

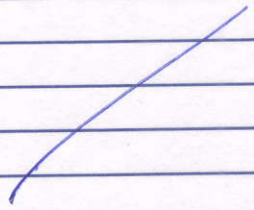
Date	Start	Date	Disconnect

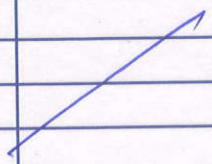
OPERATION THEATRE

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	:

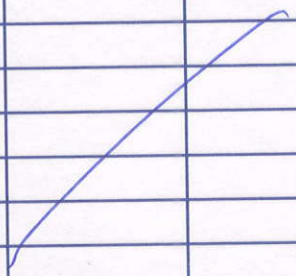
Date	LABORATORY
25/9/24	Bilirubin

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

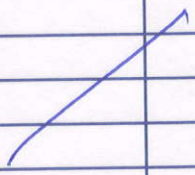




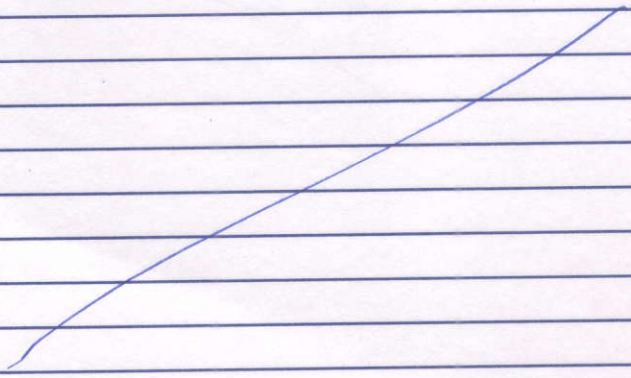
CBG



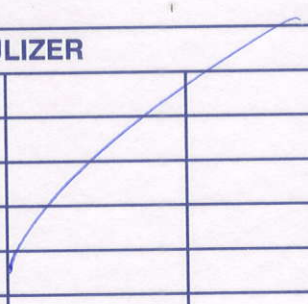
CBG



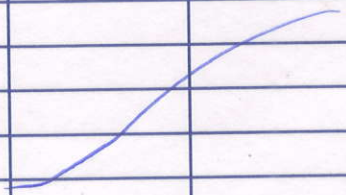
Date	PHYSIOTHERAPY



NEBULIZER



NEBULIZER



CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Rai Sir	23/9/24	24/9/24					

PHARMACY

OT DRUGS REPLACED : –

BILL CLEARED : Medicine - 170/- Mam 25/9/24.

RETURNS CHECKED :

AMBULANCE

Other Procedures : (specify) :-

Double phototherapy - 23/9/24 → at: 7.15 PM

Double phototherapy - 25/9/24 → at: 7 AM

Admission Officer

Sister In-charge