BILLING CARD

Child.NETRIKAA SAI H R
2/Female/MHM202407138
23/09/2024/IPM2024000865
Dr.DHANASEKHAR K

Patient Name _____

IP No. _____

Room No. _____

D.O.A. 23/9/24 Time 7:15 PM

Rent Per Day 1500/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
23/09/24.	8.20 pm	ER.	3rd Floor 309.	Rani 3no

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 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
23/9/24,	CBC, CRP, LFT, Dengue NS, (6775) urine C/S, blood C/S (6776)

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

29/9/04	CXR (6775)		

CBG

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. Dhanasekar	23/9/24	24/9/24 (2)	26/9/24 (4)	27/9/24			

PHARMACY		AMBULANCE
OT DRUGS REPLACED	: Total Bill Amt. Rs. 2948.00 + Pend	NIL
BILL CLEARED	:	
RETURNS CHECKED	: 24/9 Sep 27 1.0 pm	

Other Procedures : (specify) :-

Diet – NIL

Admission Officer

Sister In-charge