

DOA: 23/9/24 at 9.35pm

DOO: 24/9/24 at 20pm

Step Down ICU -

BILLING CARDPatient Name Mrs. JAYAKKODI.DD.O.A. 23/09/24 time 09:35pm

60, Female, MIIC202474615

IP No. 23.09/2024/IPC2024002640Room No. Dr. ARTHI

Cash

Rent Per Day 3300/-**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

OXYGEN**SYRINGE PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED**SCD PUMP****VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEATRE

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Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date

LABORATORY

23/9/24. CBC, RBS, Urea, Creatinine, Sr. Electrolytes, CRP 9.11.912

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

23/9/24

Ex.

11912

188

24.9.21

- 1973

Dr. Sureshkumar

ACT

NUMBERS

PHYSIOTHERAPY

OTHERS

NUMBERS

24/9/24

~~1+1+x~~