

**BILLING CARD**

MH/ PRINT / 0007 / BILL / FO

Patient Name Mrs. Susheela Seetharaman.D.O.A. 25/9/24 Time 4.30pmIP No. DPKB2024001237Room No. 203.Rent Per Day 2000 / -**TRANSFER DETAILS**

Date	Time	From	To	Sister Signature
<u>25/9/24</u>	<u>5:45PM</u>	<u>Casualty</u>	<u>ID No 11009</u>	<u>S/N Subarna</u>

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**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

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Date

LABORATORY

25/9/24 CBC, Sr. Electrolytes, RFT, PT, PNR, APTT
 urine complete (OPKB202405086) OP Paid.

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

25/9/24 ECG (OPKB 202405086) OP Rd.

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

Ref: Madhavan Amb - 2k pair

[illegible]

PHARMACY

AMBULANCE

OT DRUGS REPLACED : V. Jeyaraj
BILL CLEARED : No due.
RETURNS CHECKED : Tot:- 163/

Other Procedures : (specify) :-

Verified by
s/Anirudh G 26

Admission Officer :

Sister In-charge