BILLING CARD

Patient Name Mr. Parathi D.O.A. 27/9/24 Time 10:20 pm

IP No. IPE2024000331

Room No. ICU Rent Per Day 3500/ Day

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
27/9/24	10:20pm	OP	Ime	
28/9/24	12:30AM	ICU	AMA	

OPERA TION 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
27/9/24	10:20pm	28/9/24	12:30AM

INFUSION PUMP

Date	Start	Date	Disconnect
27/9/24	11:00pm	28/9/24	12:30AM

OXYGEN

Date	Start	Date	Disconnect
27/9/24	10:20pm	28/9/24	12:30AM

SYRINGE PUMP

Date	Start	Date	Disconnect
27/9/24	11:00pm	28/9/24	12:30AM
27/9/24	11:10pm	28/9/24	12:30AM
27/9/24	11:30pm	28/9/24	12:30AM

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect
27/9/24	10:40pm	28/9/24	12:30AM

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	:

Date	LABORATORY
27/9/24	ABG,

	RADIOLOGY - ECG / ECHO / X-RA Y / USG / CT / MRI / DRP / BIO-DOPPLER		
27/9/24	(CT- chest), ECG		
	Bill no: MMH/[illegible]202401349		

	CBG			CBG			
27/9/24	(1)						

Date	PHYSIOTHERAPY

	NEBULIZER			NEBULIZER			
27/9/24	(1)						

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Parthasarathy Anand.							
Dr. Lagesh (ED)	27/3/24 ①						

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED :	
RETURNS CHECKED :	

Other Procedures : (specify) :-

- Pulmonary catheterization Done at ICU
- ICU line procedure Done at EMR
- EJV line procedure Done at ICU

DOA - 27/9/24
DOD - 28/9/24

Dr. Dhanarajan

Admission Officer :

Sister In-charge