



Mrs. THARMABAI
74/Female/MHV202404917
01/10/2024, IPV202400018
Dr. D. NIVEDHIDHA

Patient

IP No.



BILLING CARD

04 OCT 2024

MH/ PRINT / 0007 / BILL / FO

D.O.A. 1/10/24 Time 12.15 Am

Room No. ICU - 16

Rent Per Day 3500/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
1/10/2024	12.15 Am	ER	ICU	D. E. 10/10/24, [Signature]
2/10/24	12.00 PM	ICU	WARD 315 NON AC	

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
1/10/24	12.30 Am	2/10/24	12 Am

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
1/10/24	12.30 Am	2/10/24	7 am

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 :

[illegible]

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

5/24 ECG, CHEST X-RAY BEDSIDE [6319]
 1/10/24 CT ABDOMEN (6355)
 1/10/24 ECHO SCREENING [6366] BY DR. KARTHIKEYAN

CBG

CBG

1/10/24 1+1+1+1
 1+1+1+1
 +1
 2/10/24 1+1+1+1
 1+1
 3/10/24 1+1+1+1
 4/10/24 1+1+1

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

1/10/24 1+1
 2/10/24 1+1+1+1
 3/10/24 1+1+1
 4/10/24 1+1

[illegible]