



BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Mrs. Vasanthi.

D.O.A. 02/10/24 Time 8.50pm

IP No. 2024001271

Room No. 207.

Rent Per Day 2000 / -

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
<u>21/10/24</u>	<u>8.50pm</u>	<u>ER</u>	<u>Ind Floor</u>	<u>[Signature]</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

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

INFUSION PUMP

OXYGEN

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

SYRINGE PUMP

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

VENTILATOR

[illegible]

OT. No. :

Start Time :

End Time

Dis. Pack

Diathermy

C-Arm

Arthroscopy

Laparoscopy

Sevoflurane / Isoflurane

Inj. Fentanyl

Others

LABORATORY

2/10/24 CBC, PFT, UPT, Sr. electrolytes Sr. cholineHraue
PFT w/ op paid) (BRKD202402408)
(OP paid)

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

2/10/24 ECG - 1 top part (BRK 202402408)
(OP part)

2/10/24 (1) top part (BRK 202402408) OP part.
7pm (1) CBG (12550)

2/10/24
CBG - (1) (256) (3)

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

Ref by: Dr. Ajay Sharma

[illegible]