

RT 1pm 8/10/24



BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name

Mrs. BHARANI KUMARIS

47/Female MHM202407376

07/10/2024/1PM2024000931

D.O.A. 7/10/24 Time 7:00 AM

IP No.

Dr. VAISHNAVI GANESAN

Room No.



Rent Per Day 1500/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
7/10/24	8PM	ER	3rd floor (209)	M. Suresh

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

OPERATION THEATRE	
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	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

OT. No. _____ :

Start Time :

End Time :

Dis. Pack _____

Diathermy

C-Arm

Arthroscopy

Laproscopy

Sevoflurane / Isoflurane

Inj. Fentanyl

Others

Date	LABORATORY
7/10/24	PFT (7234)

7	10	24
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TFT (7234)

Kreatinine (7239)

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

7/10/24 Ecg (7235)

7/10/24 Echo (7235)

7/10/24 CT - ~~PPS~~ PNS (7245)

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]

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

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge