

**BILLING CARD****MH/ PRINT / 0007 / BILL / FO**Patient Name MRS. LaxmiD.O.A. 7/10/24 Time 8:47 AMIP No. 1PE004000358Room No. 108 → 207Rent Per Day 3500/day**TRANSFER DETAILS**

Date	Time	From	To	Sister Signature
7/10/24	6:15 AM	OP	EMR	BL
7/10/24	9 AM	EMR	ICU	Kashika
11/10/24	1:30 PM	ICU	WARD	Kavin

OPERATION THEATRE

Date :	OT No. :
Surgeon :	Start Time :
I Asst. Surgeon :	End Time :
II Asst. Surgeon :	Dis. Pack :
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
7/10/24	6:15 AM	11/10/24	1:30 PM	7/10/24	9 AM	10/10/24	8:00 PM

OXYGEN**SYRINGE PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
7/10/24	6:15 AM	11/10/24	8 AM	7/10/24	9 AM	10/10/24	6:00 AM
				7/10/24	9 AM	11/10/24	6:00 AM

ALPHA BED / SCD PUMP**VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
09/10/24	6:00 AM	11/10/24	6:00 AM	7/10/24	9 AM	8/10/24	6:00 AM
					BI - PAP		
				8/10/24	8:00 AM	10/10/24	1:00 PM
				10/10/24	2 Hours only		

OPERATION THEATRE	
Date :	OT. No. :
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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
7/10/24	CBC, RFT , Sr. Electrolytes, Urine R/E, ABG, RBS MMH/MV/D4E202401426)
7/10/24	Urine c/s, Blood c/s, Electrolytes, ABG.
8/10/24	CBC, Electrolytes, HbA1C, Creatinine, CRP, ABG, Urea. K ⁺ , ABG, K ⁺
9/10/24	CBC, ABG, Urine Ketone, Electrolyte, D-Dimer, ABG, Sr. Electrolyte.
10/10/24	Tc, Dc, Sr. Electrolytes, Blood grouping typing, ABG, Urine routine.
11/10/24	CBC, Sr. potassium
12/10/24	Sr. potassium
12/10/24	CBC, CRP.
13/10/24	Sr. Potassium.
14/10/24	Sr. potassium

[illegible]

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

08/10/24 ECG .

8/10/24 Chest PA .

CBG

7/10/24 10

8/10/24 16

9/10/24 16

10/10/24 2.

11/10/24 6 + 1 + 1 + 1

12/10/24 1 + 1 + 1

13/10/24 1 + 1 + 1

14/10/24 1 + 1 + 1

CBG

Date

PHYSIOTHERAPY

10/10/24 ① ref.

11/10/24 ① ref.

14/10/24 ① ref.

15/10/24 ① ref.

NEBULIZER

NEBULIZER

