BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name: Ms.KAVIYA
25/Female/MHM202407389
08/10/2024/IPM2024000934
Dr.VAISHNAVI GANESAN

IP No. _____

Room No. _____

D.O.A. 8/10/24 Time 12.15AM

Rent Per Day 7500/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
08/10/24	2.20am	ER	ICU	Rathnapriya 2240
8/10/24	12.30pm	ICU	3rd Floor	8 to 3pm

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
8/10/24	2.20am	8/10/24	3pm

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

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	:

Date	LABORATORY
08/10/24	CBC, RFT, LFT, Urine R/E (7255) ABG EGT (7266)
9/10/24	CBC RFT (7290)

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

08/10/24	ECG (7257)		
	Chest xray (7267)		

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. vaishnavi	8/10/24	9/10/24					
Dr. Murugappan (Dr. psychiatric)	8/10/24						

PHARMACY		AMBULANCE
OT DRUGS REPLACED	: Total Sale: Rs. 2407/-	NIL
BILL CLEARED	: Cash paid	
RETURNS CHECKED	: Time: 1.27pm	3167 9/10/24

Other Procedures : (specify) :- MLC Case.

08/10/24 Ryles tube done in ER