BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name Baby. P. Mamu Neetha D.O.A 8/10/24 Time 14:20pm

IP No. 2024001293

Room No. 203 Rent Per Day 2000/-

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
8/9/24	3pm	casualty	IInd floor	

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

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
11/10/24	C.R.P (89.6.)

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

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

8/10/24			
9.30pm.			
9/10/24			
1.30am.			
5.30am.			
10pm			
10/10/24			

NEBULIZER

(3) 9/10/24

Rep:- Dr. Manivannan.

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. maheswaran	Today	09/10/24	10/10/24	11/10/24			
morning	10pm. (1)	11am (2)		12pm (3)			
Evening			7:15pm (4)		9pm. (5)		
night		9pm (3)					

PHARMACY		AMBULANCE
OT DRUGS REPLACED :	Total : 5282/-	verified by
BILL CLEARED :		K. Devi 12/11/24 at 9AM
RETURNS CHECKED :	No due	

Other Procedures : (specify) :-

Admission Officer :

Sister In-charge