

01 JUN 2024

MH/ PRINT / 0007 / BILL / FO

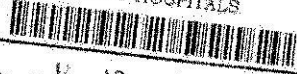


Mrs. ABINAYA

27/Female/MHV202300508

30/05/2024/IPV2024000440

Dr. MEDWAY HOSPITALS

**BILLING CARD**

01 JUN 2024

D.O.A. 30/05/24 Time 11:00 PM

Patient Name

IP No.

Room No. Single Room

Rent Per Day 22.00

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
30/5/24	11:10pm	ER	315 (ward)	(Signature)

OPERATION THEA TRE

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 :	Laproscopey :
	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 THEA TRE	
Date :	OT. No. :
Surgeon :	Start Time :
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Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]

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

30/5/24 ECG (3148)

31/5/24 ECG (3152)

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

[illegible]