

Ref: DR. B.R.J. Kannan
MR. PILLAI

27

MVR

Discharge on 25/04/24
Self

MHI/DP/2022/104

 Medway Hospitals The way to better health (A Unit of United Alliance Healthcare Pvt Ltd)		BILLING CARD SAFETY FIRST		  
Child: HAFEELA.M 10/Female/MHI202481681 19/05/2024/IPH2024001211		CCU-2 ward-4		D.O.A. 19-5-24, Time 11:02 AM
Patient Name _____		Dr. ANBARASU MOHANRAJ 		
IP No. _____		Room No. _____		Rent Per Day _____

Date	Time	From	To	Nurse's Signature
19/5/24	12:00	FO	204-A	S. Dora
20/5/24	11:30	2nd floor 204 A	OT	R. S. 02
20/5/24	16:25	CTOT	SICU	Fairing / 02
21/5/24	10:45	SDW	SD - DW	02
22/5/24	10:20	SDW	2nd floor (204)	Nurse

OPERATION THEATRE			
Date	: 20/5/24	OT No.	: J
Surgeon	: DR. ANBARASU	Start Time	: 12:30
I Asst. Surgeon	: DR. PRAVEEN	End Time	: 16:25
II Asst. Surgeon	: PA. SAKKUMARI	Dis. Pack	: -
III Asst. Surgeon	: -	Diathermy	: USED
Anaesthetist	: DR. JEEVA	C-Arm	: -
OT Nurse	: SUJATHA / CHRISTY / FARINA	Arthroscopy	: -
Name of Surgery	MV Repair (Annuloplasty Ring) / L.A. [OPEN HEART]		
	LAPROSCOPY		
	Sevoflurane / Isoflurane : 2 HRS		
	Inj. Fentanyl : 2ml 10ml/inj. morphine		
	Others : 1 30MM CEPHYSD I MITRAL RINN		
MONITOR		INFUSION PUMP	

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
20/5/24	16:30	20/5/24	10:10				

OXYGEN				SYRINGE PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
20/5/24	16:30	20/5/24	22:30	20/5/24	16:30	21/5/24	2:30
				20/5/24	16:30	21/5/24	6:00

ALPHA BED				SCD PUMP		VENTILATOR	
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
20/5/24	16:30	20/5/24	19:30				

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 :

[illegible]

[illegible]

AUCTUS LABS PRIVATE LIMITED						State Code : 33							
NO.11. OLD NO.5. 1st FLOOR. CORPORATION COLONY MAIN ROAD,RANGARAJAPURAM, KODAMBAKKAM,CHENNAI - 600024 Ph: 044-48509191 DL NO: 4001/MZII/20B : 4166/MZII/21B CREDIT-BILL						Place Of Supply : TAMILNADU							
						GSTIN : 33AAMCA2113K1ZY							
To : 686 UNITED ALLIANCE HEALTHCARE (P) LTD - CARDIAC CARDIAC KODAMBAKKAM CHENNAI 600024 PH :				Bill Date 21/05/2024 Terms WHOLE SALES GSTIN 33AABCU3941Q1ZZ		Bill No & Page No AUC/WS181 1/1 Salesman Name 4-PATIENT DL NO : N.A							
S.No	MFR	Description	PCK	HSN	Batch No.	Exp	Qty	Fr	GST%	GST	Rate	MRP	Amount
1		EDWARDS MODEL 4450M30	1	90219090	10679760	04/28	1	0	5 %	2466.20	49324.00	51790.20	49324.00
ITEMS : 1 QTY : 1 BASE : 49324.00 SGST : 1233.10 CGST : 1233.10 GST : 2466.20 Goods Value: 49324.00													
Category	Gross	CGST	SGST	Amount	P(Disc)	DB							
5 %	49324.00	1233.10	1233.10	51790.20		CR							
						CD	0.00	0.00					
Rounded Net Amount												51790.00	
AXIS A/C : 922030011606851 IFSC : UTIB0001165													
Amount In Words : Fifty One Thousand Seven Hundred Ninety Rupees Only Chq in Favour of AUCTUS LABS PVT LTD Remarks : P.N-HAFEELA-IP-2024001211-DR.ANBARASU MOHANRAJ Customer Outstanding: 93273769.00													
User Name													
For AUCTUS LABS PRIVATE LIMITED AUTHORIZED SIGNATORY													

State Code	:	33
Place Of Supply	:	TAMILNADU
GSTIN	:	33AAMCA2113K1ZY

NO.11. OLD NO.5. 1st FLOOR. CORPORATION COLONY MAIN ROAD,RANGARAJAPURAM,
KODAMBAKKAM,CHENNAI - 600024 Ph: 044-48509191
DL NO: 4001/MZII/20B : 4166/MZII/21B
CREDIT-BILL

To : 686
UNITED ALLIANCE HEALTHCARE (P)
LTD - CARDIAC
CARDIAC
KODAMBAKKAM
CHENNAI 600024
PH :

Bill Date 21/05/2024	Bill No & Page No AUC/WS181 1/1
Terms WHOLE SALES	Salesman Name 4-PATIENT
GSTIN 33AABCU3941Q1ZZ	DL NO : N.A

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Chq in Favour of AUCTUS LABS PVT LTD
Remarks : P.N-HAFEELA-IP-2024001211-DR.ANBARASU MOHANRAJ
Customer Outstanding: 93273769.00

For AUCTUS LABS PRIVATE LIMITED

User Name
HAPI

AUTHORIZED SIGNATORY