

I floor

BILLING CARD

Medway JSP Hos
The way to better in
(A Unit of United Alliance Healthcare)

Mrs. YASODHA

45 / Female / MHC202402241

Patient Name 14/01/2024 / IPC2024000123

IP No. Dr. SASIKALA

Room No.



Cash.

D.O.A. 14/01/24 Time 09:46pm

Gen. word - 13

Rent Per Day 1500/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

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 : 2ml 10ml / Inj. Morphine
	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 THEATRE

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	Inj. Fentanyl :
	Others :

Date

LABORATORY

14/1/24 CBC, urea, creatine, VET, VIR - 202400608
 15/1/24 CBC 000642
 16/01/24 Dengue, Lepto, serab - 000645

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER							
15/01/24	Chem PA			Doe	Pae		
CBG				ABG		ACT	
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS
Date	PHYSIOTHERAPY						
NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS