II FLOOR

BILLING CARD

Medway JSP Hospitals
The way to better health
(A Unit of United Alliance Healthc

Patient Name: Mr.ARUNADEEPAM K
42/Male/MHC202404623
30/01/2024/IPC2024000316
IP No. _____ Dr.ARTHI
Room No. __

4w(59)
CASH

D.O.A. 30/1/24 Time 11.31 AM
Rent Per Day 1500/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 30/1/24	OT No.	:	II
Surgeon	: Dr-Sudharsan	Start Time	:	11.30 AM
I Asst. Surgeon	:	End Time	:	12. PM
II Asst. Surgeon	:	Dis. Pack	:	—
III Asst. Surgeon	:	Diathermy	:	—
Anaesthetist	:	C-Arm	:	—
OT Nurse	: S/N-yoga.	Arthroscopy	:	—
Name of Surgery	: left Index Finger Suturing	Laproscopy	:	—
		Sevoflurane / Isoflurane	:	—
		Inj. Fentanyl	: 2ml 10ml/Inj. Morphine	—
		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

Date	Start	Date	Disconnect

SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED :	
RETURNS CHECKED :	

CROSS MATCHING :

RESERVATION OF BLOOD :

STERILE TRAY USED :

TRANFUSION (BLOOD)

ATTENDER'S HOLDING :

OTHER PROCDURES :

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

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

CBG				ABG			ACT
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS

Date	PHYSIOTHERAPY

NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS