

DoA 2/2/24 at 4.44 pm
DoD 4/2/24 at 9.00pm

3rd Floor (N/A/C)

BILLING CARD

Medway 250 Hospital
The only for better health

Patient Name **Baby RAKSHITHA V**
IP No **Female (MRC202405097)**
Room No **12/02 2024/PC224000051**
By **ARAVINDH RAJIA P S**

DOA **2/2/24** Time **4.47 PM**

Rent Per Day **1,850/-**

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	Laprosocopy
	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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Anaesthetist	C Arm
OT Nurse	Arthroscopy
Name of Surgery	Laproscopy
	Sevoflurane / Isoflurane
	Inj Fentanyl
	Others

LABORATORY

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