

DD : 7/2/24 at: 11.01 AM

DD : 10/2/24 at: 5.00 PM

floor

G/W: 58(2)

**Medway JSP Hospitals**
The way to better health
(A Unit of United Alliance Healthcare F)

BILLING CARD

Mr. PURUSHOTHAMAN
81/Male/MHC202405873
07/02/2024/IPC2024000407
Dr. ARTHI

Patient Name _____
IP No. _____
Room No. _____

D.O.A 07/02/24 Time 11:01 AM

cash

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

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	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date	LABORATORY
7/2/24	CBC, LFT, RET, RES, Electrolytes, BT, CT, Grouping & Typing - 1851k
7/2/24	Reticulocyte Count, Ferritin, PS study - 1852 Ry
9/2/24	CBC

[illegible]