

D.O.A 13/9/24

D.O.D 14/9/24 7PM

II Floor children ward.

BILLING CARD

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

Child: HARSHITH

D.O.A. 13.09.24 Time 12:06 PM

Patient Name 2/Male/MIIC202405883

13/09/2024/IPC2024002496

IP No. _____

Dr. ARAVINDH RAJIA P.S

Rent Per Day 1200/-

Room No. _____

**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

Date	Start	Date	Disconnect

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED**SCD PUMP****VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

[illegible]

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	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date

LABORATORY

13/9/24 CBC, CRP, Widal, Dengue NSI - 711426

13/9/24

[illegible]