

13 FEB 2024

MH/ PRINT / 0007 / BILL / FO

Baby.PUVINAN R

0/Male/MHV202401370

11/02/2024/IPV2024000093

Dr.MEDWAY HOSPITALS



BILLING CARD



Patient Name

D.O.A. 11/02/24 Time 6:50pm

IP No.

Room No. 319B / Twin Sharing Non A/C

Rent Per Day 1200/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
11/2/24	8 pm	ER	ward	Sau 2013

OPERATION THEA TRE

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 :

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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	Inj. Fentanyl :
	Others :

[illegible]

11/62/AL.

[illegible]

