

W.H. / 11 floor.
NON/AC.

1st Floor
R. NO: 14

NON AC.


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

BILLING CARD

Cash

Patient Name **Mr. SOHANBABU**
20/Male/MHC202406742
13/02/2024/IPC2024000487
IP No. _____
Room No. _____
Dr. ARTHI

D.O.A 13/02/24 Time 01:09 pm

Rent Per Day 1850/-

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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LABORATORY

Date	
14/10/24	LEFT, RBS, Electrolytes ⇒ 202402284
14/12	8Meal Br MP & MP 02287
15/2/24	CBC - 202402321

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

12/2	ECH	due	02271
14/02/24	chest PA - 202402275	due	for

CBG

ABG

ACT

DATE

NUMBERS

DATE

NUMBERS

DATE

NUMBERS

DATE

NUMBERS

Date

PHYSIOTHERAPY

NEBULIZER

OTHERS

DATE

NUMBERS

DATE

NUMBERS

DATE

NUMBERS

DATE

NUMBERS