

date Adm : 15/2/24 At 9.34 pm

Re-2.20 Rm

date Dis : 18/2/24 II Floor (G/W)

AT 4pm

CASH

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

BILLING CARD

Patient Name **Mrs. RANI**
55/Female/MHC202407134

D.O.A. 15/2/24 Time 9.34 PM

IP No. 15/02/2024/IPC2024000508

Room No. Dr. ARTHI

Rent Per Day 11500/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date :	<u>16/02/24</u>	OT No. :	<u>①</u>
Surgeon :	<u>DR. PSL</u>	Start Time :	<u>7.15 AM</u>
I Asst. Surgeon :	<u> </u>	End Time :	<u>7.45 AM</u>
II Asst. Surgeon :	<u> </u>	Dis. Pack :	<u> </u>
III Asst. Surgeon :	<u> </u>	Diathermy :	<u> </u>
Anaesthetist :	<u>DR. Ravikumar</u>	C-Arm :	<u> </u>
OT Nurse :	<u>YOGA</u>	Arthroscopy :	<u> </u>
Name of Surgery :	<u>Perineal ABCes</u>	Laproscopy :	<u> </u>
		Sevoflurane / Isoflurane :	<u> </u>
		Inj. Fentanyl : 2ml 10ml/Inj. Morphine :	<u> </u>
		Others :	<u> </u>

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	
Date :	OT. No. :
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III Asst. Surgeon :	Diathermy :
Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

[illegible]