I floor

cash

BILLING CARD

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

non-AC- ROOM

Mrs.SARANYA.A
25/Female/MHC202409316
04/03/2024/IPC2024000710
Dr.MALINI

Patient Name _____ D.O.A 4/3/24 Time 07:48 AM

IP No. _____

Room No. _____ Rent Per Day 1850/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	:	4/03/24	OT No.	:	(2)
Surgeon	:	DR. MALINI	Start Time	:	1.30pm
I Asst. Surgeon	:		End Time	:	2.00pm
II Asst. Surgeon	:		Dis. Pack	:	
III Asst. Surgeon	:		Diathermy	:	
Anaesthetist	:	DR. MRK	C-Arm	:	
OT Nurse	:	YOGA	Arthroscopy	:	
Name of Surgery	:	D&C	Laproscopy	:	
			Sevoflurane / Isoflurane	:	
			Inj. Fentanyl	:	2ml/10ml/Inj. Morphine (1) AMP
			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

Date	Start	Date	Disconnect

SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date

PHARMACY	AMBULANCE
OT DRUGS REPLACED : R-Thamizh. BILL CLEARED : Nil RETURNS CHECKED :	Nil

CROSS MATCHING :

RESERVATION OF BLOOD :

STERILE TRAY USED : Nil

TRANFUSION (BLOOD)

ATTENDER'S HOLDING :

OTHER PROCDURES :

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	:
		Others	:

Date	LABORATORY
4/2/14	HB, BT, CT, - 3356

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

CBG				ABG			ACT
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS

Date	PHYSIOTHERAPY

NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS