DOA = 15/3/23 7:34 pm II-floor

DOD- 17/3/24 4:00 pm NON-AC-ROOM.

Medway JSP Hospitals
The way to better healt
(A Unit of United Alliance Healthcare Pvt.

Child.MRITHVIKA
4/Female/MHC202409378
15/03/2024/IPC2024000839
Dr.SHEETAL

BILLING CARD Cash.

Patient Name _____ D.O.A 15/3/24 Time 07:34pm

IP No. _____

Room No. _____ Rent Per Day 1850/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 16/3/24	OT No.	: 1
Surgeon	: Dr. Sheetal	Start Time	: 2.45 Pm
I Asst. Surgeon	: -	End Time	: 3.45 Pm
II Asst. Surgeon	: -	Dis. Pack	: -
III Asst. Surgeon	: -	Diathermy	: -
Anaesthetist	: Dr. Arthi	C-Arm	: -
OT Nurse	: Regina / Sangeetha	Arthroscopy	: -
Name of Surgery	: Tonsilectomy	Laproscopy	: -
		Sevoflurane / Isoflurane	: 100%
		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	Disconnect

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Sheetal (Ent)	16/3/24	17/3/24					

PHARMACY	AMBULANCE
OT DRUGS REPLACED : given BILL CLEARED : RETURNS CHECKED :	—

CROSS MATCHING :

RESERVATION OF BLOOD :

STERILE TRAY USED :

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	: NIL
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	:
		Others	:

Date	LABORATORY
16/8/24	HBSAG, CBC, BT, CT, Anti HCV, VDRL, HIV-I, II Blood Group & Typing. 3989

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER			
15/3/24	Chest - AP	dec.	R. Mohan Raj

CBG				ABG			ACT
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS

Date	PHYSIOTHERAPY

NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS