

DOD: 18/3/24 at 7pm



Medway JSP Hospitals
The way to better health
(A Unit of United Alliance Healthcare Pvt Ltd)

Mr.PALANIYAPPAN.L

45/Male/MHC202410679

16/03/2024/IPC2024000840

Dr. ARTHI



Patient Name M

IP No.

Room No.

BILLING CARD

D.O.A. 16/3/24 Time 9:30 AM

Rent Per Day

3,300/-

TRANSFER DETAILS

[illegible]

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

[illegible]

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

[illegible]

SYRINGE PUMP

[illegible]

ALPHA BED

Date	Start	Date	Disconnect

SCD PUMP

Date	Start

VENTILATOR

Date	Disconnect

[illegible]

OPERATION THEATRE	
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Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date	LABORATORY
16/3/24	CBC, Urea, Creatinine, LFT, RBS, electrolytes, HBA1c, Urine complete, Urine CIS - 4003
17/3/24	FBS - 4022
18/3/24	FBS - 04068
18/03/24	PPBS - 04072

16/3/24. CBC, Urea, Creatinine, LFT, RBS, electrolytes, HbA1c - 4003
Urine Complete, Urine Cls

17/3/24 FBS-4022

18/3/24	FBS- 04068
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18/03/24 PPBS - 04072

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

16 | 3 | 2

X-Ray Chest PA

Due.

Price \$4004

16 13/24

ECG

due

17.13 22

□. Brain (1)

den

2

CBG

ABG

ACT

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

ABG

ACT

$$17/3/24$$

1 + 104004

1713124

111-4056

Date _____

PHYSIOTHERAPY

NEBULIZER

OTHERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

OTHER

5
