1st floor

BILLING CARD

Medway JSP Hospitals
The way to better h
(A Unit of United Alliance Healthca

Mrs.THILAGA
36/Female/MHC202413304
10/04/2024/IPC2024001060
Dr.VALLIAMMAL K

Patient Name _____
IP No. _____
Room No. _____

D.O.A. 10/4/24 Time 5:04 AM

Rent Per Day 1500/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 10/4/24	OT No.	: OT. (1)
Surgeon	: DR: VALLIAMMAL	Start Time	: 7.15 AM
I Asst. Surgeon	: DR: Sasikala	End Time	: 7.45 AM
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	: DR. Ravikumar	C-Arm	:
OT Nurse	: MRS. Reena	Arthroscopy	:
Name of Surgery	: LAP ST	Laproscopy	✓
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	: 2ml 10ml/Inj. Morphine
		Others	: Inj Fent — 1ml — (2) ml

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
Dr. Rattigmod	10/4						

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

CROSS MATCHING :

RESERVATION OF BLOOD :

STERILE TRAY USED :

TRANFUSION (BLOOD) Nil

ATTENDER'S HOLDING :

OTHER PROCDURES :

D.O.D

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

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

10/8/24	ECG (1)	due	K Sudha 50/9

CBG				ABG			ACT
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS

Date	PHYSIOTHERAPY

NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS