

DOA 30/04/24 at 2.07PM
DOD 30/04/24 at 4 PM

D.C.O

Medway JSI
The way to b
(A Unit of United Alank)

Mr. SHANMUGAM
70 / Male / MHC202415220
30/04/2024 / IPC2024001229

Patient Name **Dr. ARTHI**

IP No. 

BILLING CARD

Cash

D.O.A. 30/04/24 Time 2:07pm

Room No. _____

Rent Per Day 1500/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

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

Date	Start	Date	Disconnect
30/04/24	2:30pm	30/04/24	4pm

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
30/04/24	2:30pm	30/04/24	4pm

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEATRE

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

[illegible]

RADIOLOGY - ECG / ECHO / X-RAY / USG / CT / MRI / DRP / BIO-DOPPLER							
CBG				ABG		ACT	
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS
30/11/24	(BN)						
Date	PHYSIOTHERAPY						
NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS