

Ref/ESI

ESI

CAG

MHI/DP/2022/104

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

BILLING CARD



Patient Name _____

IP No. _____

Room No. _____

Mr. RAGHU S (ESI)

51/Male/MHI202483834

10/05/2024/IPH2024001144

Dr. G. GNANAVELU



D.O.A. 10/5/24 Time 10:59AM

TRANSFER DETAILS

Rent Per Day _____

RL

Date	Time	From	To	Nurse's Signature
10/5/24	10:59	admission	RL	[Signature]
10/5/24	12:57	RL	cath lab	[Signature]
10/5/24	14:20	cath lab	RL	[Signature]

OPERATION THEATRE

Date	: 10/5/2024	OT No.	: CATH LAB - I
Surgeon	: DR. Gnanavelu	Start Time	: 13:30
I Asst. Surgeon	:	End Time	: 14:10
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: P/N Priya	Arthroscopy	:
Name of Surgery	: CAG	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl : 2ml 10ml/inj. monphi:	:
		Others	:

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

[illegible]