



CAA-ESI

MHI/DP/2022/104



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

BILLING CARD

SAFETY FIRST

Patient Name **Mrs. KALAIYARASI M(ESI)**

55/Female/MHI202483900

IP No. **Dr.G. GNANAVELU**

16/05/2024/IPH2024001188

Room No.

D.O.A. **16/5/24** Time **9.43 AM**

TRANSFER DETAILS

Rent Per Day _____

Date	Time	From	To	Nurse's Signature
16/5/24	9.43	ADMISSION	RL	
16/5/24	10:40.	RL	CATH LAB	
16/5/24	11:50	CATH LAB	RL	

OPERATION THEATRE

Date	: 16/05/24	OT No.	: CATH LAB - II
Surgeon	: Dr. Gnanavelu. G	Start Time	: 11:10
I Asst. Surgeon	:	End Time	: 11:35
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: R/n - prgya	Arthroscopy	:
Name of Surgery	: CAOT	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

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