D.O.A - 15/5/24 59 (1) 9/10 II Floor
D.O.D - 17/5/24 at 4pm.

BILLING CARD

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

Patient Nam: Mrs.KAVITHA
48/Female/MHC202416571
15/05/2024/IPC2024001365
Dr.ARTHI

IP No. _____
Room No. _____

Cash

D.O.A. 15/05/24 Time 08:45 A

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

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. Valliyammal DMO	15/5/24	17/05/25					
DR. Chennimoj	15/5/24	16/5/24					
DR. Sanjeevigam(ms)	15/5/24						
DR. Senthil Kumar (uro)	16/5/24						

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

CROSS MATCHING :

RESERVATION OF BLOOD : NIL

STERILE TRAY USED :

TRANFUSION (BLOOD)

ATTENDER'S HOLDING :

D.O.D on 17.5.24 at 4pm.

OTHER PROCDURES : Diet Consultation

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
15/5/24.	CBC, RBS, HbA1c, urea, creatinine, Electrolytes,
	urine RE, urine Cks. - 6324
15/5/24	LFT - 6329
16/5/24	FBS, Lipid profile, Thyroid Profile Free. 6361
17/5/24	FBS - 6398

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

15/5/24	X-Ray Chest	Done	Single
15/5/24	Echo	Done	Comp.
15/5/24	CT-KUB	due	Single
16/5/24	CECT- Abdomen	due	Single

CBG

DATE	NUMBERS	DATE	NUMBERS

ABG

DATE	NUMBERS	DATE	NUMBERS

ACT

PHYSIOTHERAPY

Date	

NEBULIZER

DATE	NUMBERS	DATE	NUMBERS

OTHERS

DATE	NUMBERS	DATE	NUMBERS