

DOA 25/7/24 at 5.18am

DOO 25/7/24 at 6PM

11 Floor

(5/3)

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

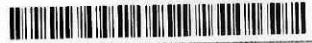
BILLING CARD

CASH

Patient Name Mrs.THENMOZHI D.O.A. 25/7/24 Time 5.18 Am

IP No. 45/Female/MIIC202417277

Room No. Dr.ARTIII Rent Per Day 1,500/-



RANSFER 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				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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OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopey :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

Date	Others
	LABORATORY
05/03/24	CBC, FBS, UREA, CREATINE, LFT, ELECTROLYTES => 9226
25/7/24	PPBS - 9234

১৫/৭/২৫
২৫/০৭/২৫

ECG C12-9226
chest ap - 9851

due
Due

K. Swaffo
P802

ACT

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

25	7	24
25	7	24

CBL (1) - 9226	
1 - 9951	

Date _____

PHYSIOTHERAPY

NEBULIZER

OTHERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS