

Ind floor

13



Medway JSP Hospitals

The way to better health

(A Unit of United Alliance Health)

Mrs. MALARVILI

Patient Name 30/Female/MHC202418021

29/05/2024/IPC2024001500

IP No. Dr.SASIKALA

Room No. 

BILLING CARD

D.O.A. 29/5/24 Time 10:39 pm

Cash

Rent Per Day 1500/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 30/05/24	OT No.	: ①
Surgeon	: DR. SASIKALA	Start Time	: 7.30 AM
I Asst. Surgeon	: _____	End Time	: 8.00 AM
II Asst. Surgeon	: _____	Dis. Pack	: _____
III Asst. Surgeon	: _____	Diathermy	: _____
Anaesthetist	: DR. RAVI KUMAR	C-Arm	: _____
OT Nurse	: REGINA	Arthroscopy	: _____
Name of Surgery	: MTP & Lap ST	Laproscopy	: INSTRUMENTS ONLY
		Sevoflurane / Isoflurane	: 500
		Inj. Fentanyl	: 2ml 10ml / inj. Morphine ①
		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

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

29/1/24 CBc, urea, creatine, RBS, BT, CT, HIV, XI
HbSA4 ⇒ 6908

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

✓ 29/05/24
29/05/24

Chest PA
ECG

Dee
dee

for J6908
K. Smith

CBG

ABG

ACT

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

Date _____

PHYSIOTHERAPY

NEBULIZER

OTHERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS