

Ref :

ESI

ESI

CAG

MHI/DP/2022/104

Medway Hospitals®
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(A Unit of United Alliance Healthcare Pvt)

BILLING CARD

Patient Name Mr. PALAYAM (ESI)
69/Male/MHI202484301
12/06/2024/1PH2024001404

SAFETY FIRSTD.O.A. 12-6-24 Time 10:34 amIP No. Dr.G. GNANAVELURoom No. **TRANSFER DETAILS**

Rent Per Day _____

Date	Time	From	To	Nurse's Signature
12/6/24	10:40	FO	RL	Amu-0182
12/6/24	11:20	RL	CATH LAB	Amu-0182
12/6/24	13:05	CATH LAB	RL	R0004

OPERATION THEATRE

Date	: 12/06/24	OT No.	: CATH LAB - II
Surgeon	: Dr. Gnanavelu. G	Start Time	: 12:20
I Asst. Surgeon	:	End Time	: 12:50
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: R/n - Abiraya	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

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