

2- Floor

CRADLE

BILLING CARD

Medway JSP Perinatal

The way to bet!
(A Unit of United Alliance H)

B/O.LAVANYA.S

01 female/MHC202420059

Patient Name 17.06.2024/IPC2024001682

IP No. Dr.ARAVINDH RAJHA P.S

Room No.



CASH

D.O.A. 17/06/24 Time 05:46pm

Rent Per Day NO RENT

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**SCD PUMP****VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEATRE	
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	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

LABORATORY

20/6/24	Bilirubin, (Total, indirect, Direct) Blood Group, Jem-24078
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