

D.O.A: 25/6/24 at 9:36pm

D.O.D: 27/6/24 at 4pm

ICU

step down

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

BILLING CARD

CAH

Patient Name

Mr. PANJANATHAN

74/Male/MHC202467493

D.O.A. 25/6/24 Time 9.36pm

IP No.

Dr. ARTIII

Room No.



Rent Per Day 3,300/-

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**INFUSION PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
25/6/24	10pm	26/6/24	9am				

OXYGEN**SYRINGE PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED**SCD PUMP****VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

[illegible]

LABORATORY

