INSURANCE

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

Ms.KEERTHANA S
16/Female/MHM202405389
27/06/2024/IPM2024000512
Dr.MEDWAY HOSPITAL

Patient Name

IP No. _____

Room No. _____

D.O.A. 27/6/24 Time 11:00 AM

Rent Per Day 4000/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
27/6/24	12. pm	ER	1st floor W4	Sanethiya 3189

OPERATION THEA TRE

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	:

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

Date	Start	Date	Disconnect

VENTILATOR

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
27/06/24	CBC. CRP. Piocal. peripheral smear study (447
	Blood c/s (4475) Scrub typhus IgM. LFT, RFT (4
	Urine RE (4485) MP and MF (4477)
	Widal Tube (4484) Urine. c/s (4486)
28/6/24	MPQBC (4498) (8.40pm)
	Mantoux test (4513) MPQBC (-) (4514)

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

27/6/24	x ray chest (4473)		
27/6/24	USG Abdomen done	by	(4499

CBG

27/6/24	1 (4472)		

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. REKHA	27/6/24	28/6/24	29/6/24	1/7/24			
Dr Supraja K	28/6						
Dr. Suresh.	29/6/24						

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Rs. 8612.00 BILL CLEARED : RETURNS CHECKED : 1/7/24 10:58pm	

Other Procedures : (specify) :-

Admission Officer : Ramu 3022

S/N manjula 32/6

Sister In-charge