

(57) DOA - 11/7/24 at 8:36pm
DOD - 21/7/24 at 4:10pm
11 Floor

(non ble)

Medway JSP Hospitals The way to better health (A Unit of United Alliance Healthcare Pvt Ltd)		BILLING CARD		CASH			
Patient Name	Mrs. GANGA BAI	D.O.A. 11/7/24		Time 8:36pm			
IP No.	56/Female/MIIC202467990						
Room No.	01/07/2024/IPC2024001802						
Dr. SUDILA S		Rent Per Day		1,850/-			
							
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
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]

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 :

LABORATORY	
Date	

[illegible]

217124 HBAIC, DBP $\Rightarrow$ 8301

2/7/24 Urine complete - 8306

[illegible]

117124

$$5167 \Rightarrow 8271$$

Duo

Brown

CBG

ABG

ACT

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

Date _____

PHYSIOTHERAPY

NEBULIZER

OTHERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS

DATE _____

NUMBERS