I FLOOR 13(1) (GLW)

BILLING CARD

CASH

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

Patient Name Mrs.AGALYA
39/Female/MIIC2024067997
01/07/2024/IPC2024001804

D.O.A. 1/7/24 Time 10.22 AM

IP No. _____ Dr.VALLIAMMAL K

Room No. _____

Rent Per Day 1,500/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	:	2/07/24	OT No.	: (1)
Surgeon	:	DR. Valli	Start Time	: 9.00 AM
I Asst. Surgeon	:		End Time	: 9.30 AM
II Asst. Surgeon	:	DR. SASIKALA	Dis. Pack	:
III Asst. Surgeon	:		Diathermy	:
Anaesthetist	:	DR. RAVI KUMAR	C-Arm	:
OT Nurse	:	YOGA	Arthroscopy	:
Name of Surgery	:	MTP & Lap ST	Laproscopy	: INSTRUMENTS ONLY
			Sevoflurane / Isoflurane	: 500
			Inj. Fentanyl	: 2ml 10ml/Inj. Morphine (1) AMP
			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

Date	Start	Date	Disconnect

SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. Valliammal. (DMO)	1/7/24	2/7/24					

PHARMACY		AMBULANCE
OT DRUGS REPLACED :	given. OT Given	Nil
BILL CLEARED :		
RETURNS CHECKED :	046	

CROSS MATCHING :

RESERVATION OF BLOOD : NIL

STERILE TRAY USED :

TRANFUSION (BLOOD)

ATTENDER'S HOLDING :

OTHER PROCDURES : Diet consultation

D.O.A - 1/7/24

D.O.D - 2/7/24

Time - 4PM.

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

CBG				ABG			ACT
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS

Date	PHYSIOTHERAPY

NEBULIZER				OTHERS			
DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS	DATE	NUMBERS

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