Ref: CGHS

CGHS

CAG

MHI/DP/2022/104

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

Mrs.RAMA S
67/Female/MH1202484855
14/08/2024/IPH2024001871
Dr.G. GNANAVELU

# BILLING CARD

SAFETY FIRST

Medway Heart Institute
Where heart beat never stops...

Patient Name

IP No.

D.O.A. 14/8/24 Time 10:18 Am

Room No.

Rent Per Day RL

## TRANSFER DETAILS

| Date | Time | From | To | Nurse's Signature |
|---|---|---|---|---|
| 14/8/24 | 10.18 | ADM | RL | |
| 14/8/24 | 14:20 | RL | Cathlab | |
| 14/8/24 | 13.40. | Cath Lab | RL | |
| | | | | |
| | | | | |
| | | | | |

## OPERATION THEATRE

| | | | |
|---|---|---|---|
| Date | : 14/8/24 | OT No. | : Cath Lab |
| Surgeon | : Dr. GG | Start Time | : ~~12.55 PM~~ 12.55 PM |
| I Asst. Surgeon | : | End Time | : 1.25 PM |
| II Asst. Surgeon | : | Dis. Pack | : |
| III Asst. Surgeon | : | Diathermy | : |
| Anaesthetist | : | C-Arm | : |
| OT Nurse | : Anandakrishnan | Arthroscopy | : |
| Name of Surgery | : CAG | Laproscopy | : |
| | | Sevoflurane / Isoflurane | : |
| | | Inj. Fentanyl | : 2ml 10ml/inj. monphi: |
| | | 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 |
|---|---|---|---|---|---|---|---|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| PHARMACY | AMBULANCE |
|---|---|
| OT DRUGS REPLACED : | T - 11902 |
| BILL CLEARED : 5426.00 8215 | |
| RETURNS CHECKED : 14/08/24 | |

**CROSS MATCHING :**

**RESERVATION PF BLOOD :**

**STERILE TRAY USED :**

**TRANFUSION ( BLOOD )**

**ATTENDER'S HOLDING :**

**OTHER PROCDURES :**

| | |
|---|---|
| Admission Officer : Jayanti | Sister In-charge |