

Ref
Dr. Anwar
Sadiq

Self

CAF

MHI/DP/2022/104

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

Mr. JABRULLA A
56/Male/MHI202484868
17/07/2024/1PH2024001669

Patient Name

IP No. **Dr. K. JAISHANKAR**

Room No. 

BILLING CARD

SAFETY FIRST



D.O.A. **17/7/24** Time **11:38 AM**

Carol Croser

Rent Per Day **RL**

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature
17/7/24	11:40	ADM	RL	<i>[Signature]</i>
17/7/24	12:15	RL	CATH LAB	<i>[Signature]</i>
17/07/24	1:25 PM	Cath Lab	RL	<i>[Signature]</i>

OPERATION THEATRE

Date	: 17-07-24	OT No.	: CATH LAB
Surgeon	: Dr. JS	Start Time	: 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	: Akinzys R/O	Arthroscopy	:
Name of Surgery	: <i>[Signature]</i>	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl : 2ml 10ml/inj. monphi:	:
		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]