

Ref
DR. b. b. b.

SELF

CAG

MHI/DP/2022/104

 Medway Hospitals® The way to better (A Unit of United Alliance Hospitals)		BILLING CARD		 		 Medway Heart Institute Where Heart's Beat never stops...	
Patient Name Mrs. KALYANI R		64/Female/MHI202485244		D.O.A. 13/8/24		Time 11.25 AM	
IP No. _____		Dr. G. GNANAVELU					
Room No. _____				TRANSFER DETAILS		Rent Per Day RL.	
Date	Time	From	To	Nurse's Signature			
13/8/24	11:30am	FRONT OFFICE	RL	S. S. S. 0345			
13/8/24	1:10pm	RL	CATH LAB	S. S. S. 0345			
13/8/24	15:00	Cath Lab	RL	A. P.			
OPERATION THEATRE							
Date : 13-08-24				OT No. : Cath Lab			
Surgeon : Dr. G. G.				Start Time : 2.25pm			
I Asst. Surgeon :				End Time : 2.45pm			
II Asst. Surgeon :				Dis. Pack :			
III Asst. Surgeon :				Diathermy :			
Anaesthetist :				C-Arm :			
OT Nurse : A. P.				Arthroscopy :			
Name of Surgery : Cath				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

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