

Rd
Pen
Prescriber

SELF Discharge on 22/8/24 MHI/DP/2022/104

CAG



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

BILLING CARD




Patient Name: Mrs. SAKILA
 54/Female/MHI202485362
 21/08/2024/1PH2024001930
 Dr. G. GNANAVELU

D.O.A. 21/8/24 Time 1.48 PM

IP No. _____
 Room No. _____

Ward - 1 + CAG
 Rent Per Day RL

Date	Time	From	To	Nurse's Signature
21/8/24	13.48	FO	RL	<i>[Signature]</i>
21/8/24	14.20	RL	Cath Lab	<i>[Signature]</i>
21/8/24	15:35	CATH LAB	RL	<i>[Signature]</i>
21/8/24	17.25	RL	2nd floor.	<i>[Signature]</i>
			(0024-3)	

OPERATION THEATRE			
Date	: 21/8/24	OT No.	: CATH LAB-II
Surgeon	: Dr. Gnanavelu. G	Start Time	: 15:10
I Asst. Surgeon	:	End Time	: 15:25
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	:
Anaesthetist	:	C-Arm	:
OT Nurse	: R/n. Bannadharani	Arthroscopy	:
Name of Surgery	: CAG	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

OPERATION THEATRE

OPERATION TEAM	
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
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[illegible]

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