Ref: ESI

ESI

Discharge on 15/9/24

CABG

MHI/DP/2022/104

BILLING CARD

Medway Hospi
The way to better heal
(A Unit of United Alliance Healthcare Pvt

Medway Heart Institute
Where heart beat never stops...

Mr.KAJENDRAN (ESI)
48/Male/MHI202485515
08/09/2024/IP1I202400209S
Dr.KAILASH A JAIN

Patient Name _____

IP No. _____

D.O.A. 08/9/24 Time 9:56 AM

Room No. _____

GW

TRANSFER DETAILS

Rent Per Day _____

Date	Time	From	To	Nurse's Signature
8/9/24	11.30	Admission	IIND-Floor (CVICU)	
10/9/24	13:50	GW, (2nd floor)	CT OT	Haydoos
10/9/24	18:45	CTOT-II	SICU	0343
11/9/24	12.00	SDICU	SDICU 2nd floor GW	
12/9/24	12.00	SDICU	GW(2)	

OPERATION THEATRE

Date	: 10/9/24.	OT No.	: CTOT-II
Surgeon	: DR. KAILASH.	Start Time	: 14:30
I Asst. Surgeon	: DR. GHAYOOR AHMED	End Time	: 18:35
II Asst. Surgeon	: PA: SARITHA	Dis. Pack	: -
III Asst. Surgeon	: -	Diathermy	: USED
Anaesthetist	: DR. SHARNA.	C-Arm	: -
OT Nurse	: S/NMALA.	Arthroscopy	: -
Name of Surgery	: OPCAB(CLOSED HEART)	Laproscopy	: -
MAN-MANSAWDRILLING USED		Sevoflurane / Isoflurane	: 3 HRS
ETOTHING 21000 TO BE CHARGED		Inj. Fentanyl	: 2ml 10ml/inj. monphi:
		Others	: -

MONITOR

Date	Start	Date	Disconnect
10/9/24	18.45	12/9/24	12.00

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
10/9/24	18.45	12/9/24	10.00

SYRINGE PUMP

Date	Start	Date	Disconnect
10/9/24	18.45	11/9/24	02:00

ALPHA BED

Date	Start	Date	Disconnect

SCD PUMP

Date	Start	Date	Disconnect
10/9/24	18.45	10/9/24	23:00
11/9/24.	NIL-4 HOURS	11/9/24	6.00

VENTILATOR

Date	Start	Date	Disconnect

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
11/9/24.	TC, UREA, CREATININE, RBS. (11626)
13/9/24	HB, UREA, CREAT, NA+, K+ (1756)

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

10/9/24	CXR A/P B/S - ① (11602)		
10/9/24	ECG B/S - ① (11602)		
11/9/24	ECG (11626)		
11/9/24	CXR A/P B/S - ① (11664)		
13/9/24	CXR A/P B/S, ECG (17656)		

CBG

DATE	NUMBERS	DATE	NUMBERS
8/9/24	1 (1776)		
9/9/24	1+1 (1776)		
10/9/24	1 (11626)		
12/9/24	1 (11691)		

ABG

DATE	NUMBERS
10/9/24	(2) 11607
10/9/24	1 (11602)
11/9/24	3 (11626)
4/9/24	1 (1680)
12/9/24	1 (11691)
12/9/24	1 (11725)

ACT

DATE	NUMBERS
10/9/24	(3) 11607

PHYSIOTHERAPY

Date	
10/9/24	19:00
11/09/24	9:00 / 16:00
12/9/24	10:00 / 16:30
13/9/24	10:00, 1630
14/9/24	11.45 / 16.00
15/9/24	11.00

NEBULIZER

DATE	NUMBERS	DATE	NUMBERS
10/9/24	1+		
11/9/24	1+1+1+1		
12/9/24	1+1+1+1		
13/9/24	1+1+1+1		
~~14/9/24~~	1+1+ Gwl!		

OTHERS

DATE	NUMBERS	DATE	NUMBERS

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. KAILASH JAIN	8/9/24	9/9/24	10/9/24	11/9/24	12/9/24	13/9/24	14/9/24
Dr. Shopna	2/9/24						
Dr. Kailash	15/9/24						
Mrs. Catherine (Dietitian)	9/9/24	10/9/24	12/9/24	13/9/24	15/9/24		

PHARMACY	AMBULANCE
OT DRUGS REPLACED : BILL CLEARED : ₹5616/- 9.M 14/9/24 RETURNS CHECKED :	CABH - 529 - 118371 16/9/24

CROSS MATCHING :

RESERVATION PF BLOOD : 2 OPW reservation done on 9/9/24.

STERILE TRAY USED : 1 SR TRAY ① no used in OT on 11/9/24
SR TRAY ① used

TRANFUSION (BLOOD)

ATTENDER'S HOLDING :

OTHER PROCDURES : 2D TEE PROBE

Admission Officer : JANANI	Sister In-charge

(Form P-1)

Employees State Insurance Corporation

~~KK-Nagar~~ Chennai, TN (ESIC Model Hosp.)

2808 KEN

Referral Letter

DO NOT MUTILATE THE QR CODE

UTI ID 626992

Referral No : Tamil2024044796

Name of the Patient : Mr. C Kajendran

Insurance No/Staff/ Pensioner Card : 5131299764

Age/Gender : 48 Years /Male **UHID** : ORA0.0000004706

UAN of IP :

Address/Contact No : oragadam

Identification marks (if any) :

IP/Beneficiary/Staff : Beneficiary

Relationship with IP/Staff : Spouse

Entitled for Specialty Rx : YES

Entitled Super Specialty Rx : YES

Diagnosis : ICD - Acute ischaemic heart disease, unspecified - 124.9 Remarks :

CGHS (Name and Code)* : 529 - CABG - Cardiovascular and Cardiac Surgery Procedures / Treatment / Investigations - No Of Sessions Allowed - 1 - Validity Upto - 09-Sep-2024

Remarks Additional Clinical Information/Procedure/Investigation: CABG (GRAFTS TO LAD AND MAJOR DIAG

Reasons / Purpose for Referral Investigations/Rx/Procedure : lack of facility

Name of the empanelled hospital whereto refer

Hospital MEDWAY HOSPITALS

Department Cardio-Thoracic-Vascular Surgery

Date & Time of Referral : 30-Aug-2024 11:27:47 AM

Dr. K.V. BALIGA, M.D.,(MED),D.M.,(Nephro)
Professor & HOD / General Medicine
E.S.I.C. Medical College & Hospital
K.K.Nagar, Chennai-78.

Name and Designation of the Referring Doctor

Dr. Krishna VEnkatesh Baliga - PROFESSOR

Or, Agreeing to / contradicting the above, I voluntarily choose Medway Hospital Hospital for treatment of self/for my Husband (relationship).

Date and Time: 3/9/24 Ph No: 6380188754

Signature/Thumb Impression of IP/Beneficiary/Staff

Referred to ________ Department of ________ Hospital/Diagnostic Centre for ________ (Reason/purpose for referral).

VERIFIED / ENTITLED FOR SST

Committee Members' Signature & Name

(VERIFIED & RECOMMENDED BY) (Signature & Designation) Date & Time:

1. Sarath Nivedha
2. Dr. Cathai
3. A. Sivakumar

3/9/24

Medical Superintendent
ESIC Medical College & Hospital
K.K. Nagar, Chennai-78

(AUTHORISED SIGNATORY WITH STAMP)
(Signature, Name &Designation)
Date & Time:

N.B.

The entitlement- eligibility of the patient should also be verified through IP Portal at www.esic.in. Referral shall be governed by the rules and administrative instructions issued from time to time. Referred Hospital is instructed to perform only those procedure/treatment for which the patient has been referred to. In case any additional procedure / treatment /investigation is essentially required to be carried out, permission for the same is mandatorily required from the approving authority of the referring hospital. The validity of this referral is upto 7 days from the date of issuance or as per the contract whichever is later and is subject to fulfilment of other terms and conditions as defined in the contract/agreement.

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30-08-2024