

DD: 6/9/24 at 1pm

ICU

Re- 12.15 PM



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

Mr. SREENIVASAN

Patient Name 60/Male/MHC202472924

04/09/2024/IPC2024002397

IP No. Dr. ARTIII

Room No. 

BILLING CARD

Cash.

D.O.A. 4/9/24 Time 1.42pm

Rent Per Day 4,900/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature
4/9/24	9pm	ICU to	Stepdown	UB

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 : 2ml 10ml/Inj. Morphine
	Others :

MONITOR

Date	Start	Date	Disconnect
4/9/24	1:42pm	4/9/24	9pm

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED

SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

[illegible]

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[illegible]

[illegible]