

60
G

Re-10.878
(Baby ward)

1 Floor

CASH



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

BILLING CARD

Patient Name **Baby.MATHEW**
2/Male/MHC202473380

IP No. **09/09/2024/IPC2024602461**

Room No. **Dr.ARAVINDII RAJIA P.S**

D.O.A. **9/9/24** Time **9.21pm**

Rent Per Day **1,200/-**



TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

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

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED

Date	Start	Date	Disconnect

SCD PUMP

Date	Start

VENTILATOR

Date	Start	Date	Disconnect

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