

Ref Dr Kailash Jain

Discharge on 16/9/24

MHI/DP/2022/104

**Medway Hospital**
The way to better health
(A Unit of United Alliance Healthcare Pvt Ltd)

BILLING CARD



Patient Name _____
IP No. _____
Room No. _____

Mr. JEETENDRA S JAIN
53/Male/MHI202485798
13/09/2024:IP112024002153
Dr. KAILASH A JAIN

D.O.A. 13/9/24 **Time** 6:30pm
TRANSFER DETAILS **Rent Per Day** CCW

Date	Time	From	To	Nurse's Signature
13/9/24	18:30	Admission	CCW	
13/9/24	10:40	CCW	Cath Lab	
14/9/24	12:50	CATH LAB	CCW	
15/9/24	10:30	CCW	1st Floor (10th B)	

OPERATION THEATRE

Date : 14/9/24
Surgeon : DR. JALSHANKAR
I Asst. Surgeon :
II Asst. Surgeon :
III Asst. Surgeon :
Anaesthetist :
OT Nurse : R/N Sandhya
Name of Surgery : GRAFT CABG + ILM

OT No. : Cath Lab - I
Start Time : 11:15
End Time : 12:00
Dis. Pack :
Diathermy :
C-Arm :
Arthroscopy :
Laproscopy :
Sevoflurane / Isoflurane :
Inj. Fentanyl : 2ml 10ml/inj. morphine:
Others :

MONITOR				INFUSION PUMP			
Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
13/9/24	18:30	15-9-24	10:30				

SYRINGE PUMP			
Date	Disconnect	Date	Start
		13-9-24	19:30

ALPHA BED				SCD PUMP		VENTILATOR	
Date	Start	Date	Disconnect	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 :

[illegible]

[illegible]