

Ref: Mr. Pillai

Self

CAY

MHI/DP/2022/104



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

BILLING CARD




Patient Name Mr. SELVARAJ

IP No. 50/Male/MHI202486100

Room No. 30/09/2024/1P112024002303

D.O.A. 30/9/24 **Time** 11:42pm

Rent Per Day PL

Dr. G. GNANAVELU



TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature
30/9/24	11:42	ADMISSION	PL	[Signature]
30/9/24	12:30	PL	CATH LAB	[Signature]
30/9/24	15:35	CATH LAB	PL	[Signature]

OPERATION THEATRE

Date : 30/9/24	OT No. : CATH LAB - II
Surgeon : Dr. Gnanavelu	Start Time : 15:10
I Asst. Surgeon :	End Time : 15:35
II Asst. Surgeon :	Dis. Pack :
III Asst. Surgeon :	Diathermy :
Anaesthetist :	C-Arm :
OT Nurse : RN Balaratharini	Arthroscopy :
Name of Surgery : CABG	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

[illegible]