DOA : 30/9/24 at 3:57 PM

DOP : 30/9/24 at 9PM

II - FLOOR NON A/C

BILLING CARD

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

Mrs.THENMOZHI
50/Female/MIIC202475138
23/09/2024/IPC2024002709
Dr.ARTHI

Patient Name _____ CASH D.O.A. 30/9/24 Time 03:57 pm

IP No. _____

Room No. ____ Rent Per Day 1850/-

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	Date	Disconnect

VENTILATOR

Date	Start	Date	Disconnect

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Chenni (PD)	30/9/24						

PHARMACY	AMBULANCE
OT DRUGS REPLACED : NIL BILL CLEARED : RETURNS CHECKED :	NIL

CROSS MATCHING :

RESERVATION OF BLOOD :

STERILE TRAY USED : NIL

TRANFUSION (BLOOD)

ATTENDER'S HOLDING :

OTHER PROCDURES :

Admission Officer : Preethi

30/9/24
Sister In-charge

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**

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

30/9/24	ECG - 2184	do	

CBG

DATE	NUMBERS	DATE	NUMBERS
30/9/24	1 - 2184		

ABG

DATE	NUMBERS	DATE	NUMBERS

ACT

DATE	NUMBERS	DATE	NUMBERS

PHYSIOTHERAPY

Date	

NEBULIZER

DATE	NUMBERS	DATE	NUMBERS

OTHERS

DATE	NUMBERS	DATE	NUMBERS