I floor Single room non AC

BILLING CARD

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

Mrs.JAYASRI
39/Female/MHC2024754S6
05/10/2024/IPC2024002763
Dr.CHRISTINA RAJKUMAR

Patient Name _____ D.O.A. 05.10.24 Time 01:31 PM

IP No. _____

Room No. ____ Rent Per Day 2900/-

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature

OPERATION THEATRE

Date	: 5/10/24	OT No.	: II
Surgeon	: Dr. Christina Rajkumar	Start Time	: 3.00 PM
I Asst. Surgeon	: -	End Time	: 3.30 PM
II Asst. Surgeon	: -	Dis. Pack	: -
III Asst. Surgeon	: -	Diathermy	: -
Anaesthetist	: Dr Padmanaban	C-Arm	: -
OT Nurse	: Rejina	Arthroscopy	: -
Name of Surgery	: F/C	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. christian Rajkumar	5/10						

PHARMACY	AMBULANCE
OT DRUGS REPLACED : Given.	—
BILL CLEARED :	
RETURNS CHECKED :	

CROSS MATCHING :

RESERVATION OF BLOOD :

STERILE TRAY USED :

TRANFUSION (BLOOD) nil.

ATTENDER'S HOLDING :

OTHER PROCDURES :

Admission Officer :

P.O.D 6/10

Sister In-charge

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

5/10	ECG due.	24/6	

CBG

DATE	NUMBERS	DATE	NUMBERS

ABG

DATE	NUMBERS	DATE	NUMBERS

ACT

PHYSIOTHERAPY

Date	

NEBULIZER

DATE	NUMBERS	DATE	NUMBERS

OTHERS

DATE	NUMBERS	DATE	NUMBERS

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