AUCTUS LABS PRIVATE LIMITED

NO.11. OLD NO.5. 1st FLOOR. CORPORATION COLONY MAIN ROAD,RANGARAJAPURAM,
KODAMBAKKAM,CHENNAI - 600024 Ph: 044-48509191
DL NO: 4001/MZII/20B : 4166/MZII/21B

CREDIT-BILL

State Code : 33
Place Of Supply : TAMILNADU
GSTIN : 33AAMCA2113K1ZY

To : 686
UNITED ALLIANCE HEALTHCARE (P) LTD - CARDIAC PATIENT
CARDIAC
KODAMBAKKAM
CHENNAI 600024
PH :

Bill Date : **17/09/2024**
Bill No & Page No : **AUC/WS594 1/1**
Terms : **WHOLE SALES**
Salesman Name : 4-PATIENT
GSTIN : 33AABCU3941Q1ZZ
DL NO : N.A

S.No	MFR	Description	PCK	HSN	Batch No.	Exp	Qty	Fr	GST%	GST	Rate	MRP	Amount
1	1 NA	MILTONIA MITRAL 29MM	1	30049099	M29MLTA79021	06/27	1	0	5 %	2100.40	42008.00	44108.40	42008.00

ITEMS : 1 QTY : 1 BASE : 42008.00 SGST : 1050.20 CGST : 1050.20 GST : 2100.40 Goods Value: 42008.00

Category	Gross	CGST	SGST	Amount	P(Disc)	DB		
5 %	42008.00	1050.20	1050.20	44108.40		CR		
						CD	0.00	0.00
					Rounded Net Amount			**44108.00**
					AXIS A/C : 922030011606851 IFSC : UTIB0001165			

Amount In Words : Forty Four Thousand One Hundred Eight Rupees Only
Chq in Favour of AUCTUS LABS PVT LTD
Remarks : P.N-KRISHNAVENI-IP-2024002124-DR.RAJESH.V
Customer Outstanding: **122772636.00**

User Name
HARI

For AUCTUS LABS PRIVATE LIMITED

AUCTUS LABS PVT LTD CHENNAI 600 024

AUTHORIZED SIGNATORY

Tel. No.:
Fax No.:
Email :

AUTHORIZAION LETTER

Date	11/09/2024 7:07PM	**Fax No.**	**Reg No.**
To	Medway Hospital, Chennai TN.	**Policy No./Card No.**	333203141688
		Payer/TPA ID Card No.	013301004002613001O883
Authorization No.	13H_2257564481920-1	**Name of the Patient**	KRISHNAVENI.P
		Age: 57 Years	**Sex:** Female
Date of Admission	11/09/2024 1:0 AM		
Provisional Diagnosis	Breathlessness on exertion		
Authorization			
Authorised Limit	136500.00		
Authorised Limit (In Words)	One Hundred Thirty Six Thousand, Five Hundred Only		
Previous Authorised Limit			
Remarks	CLAIMS WILL BE SETTLED IN ACCORDANCE WITH THE TREATMENT GIVEN /SURGERY DONE....		

Instruction to Hospitals:

1. This Authorization letter is issued that the information given in the pre-authorization is correct. Any information hidden/wrongly given regarding pre-existing disease will make this authorization null and void.
2. This Authorization is binding on the insurance policy terms, limitations and conditions.
3. Disclaimer : The cashless access given to network hospital is merely a facility extended by Payer. Payer does not guarantee the availability, quality and out come of treatment.
   * Denial is in no way to be construed as denial of treatment, only cashless access is denied.
4. If amount exceeds authorization amount Payer approvals has been obtained for enhancement. Payer will be pleased to confirm on Insurance policy limits and conditions.

This is a Computer Generated Statement So No Signature is Required.

Note : Please quote our Authorization Number in all the correspondence and bills.

Dr. Ganapathi

CM SCHEME

MVR

Discharge on 13/9/24

MHI/DP/2022/104

BILLING CARD

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

Medway Heart Institute — Where heart beat never stops...

Mrs.KRISHNAVENI .P(CM SCHEV
57/Female/MHI202375377
11/09/2024/IP1I2024002129
Dr.RAJESH.V

Patient Name _____

IP No. _____

Room No. _____

D.O.A. 11/9/24 Time 12:00 pm

OTP - 51537

Rent Per Day 201

TRANSFER DETAILS

Date	Time	From	To	Nurse's Signature
11/9/24	12.10	ADMISSION	IInd Floor 201(B)	
13/9/24	8.00	201-A	CT OT	
13/9/24	12.55	CTOT	SICU	
15/9/24	10.00	SICU	201-A	

OPERATION THEATRE

Date	: 13/9/24	OT No.	: OT-I
Surgeon	: DR. RAJESH	Start Time	: 8.20 AM
I Asst. Surgeon	: DR. PRAVEEN	End Time	: 12.55
~~II Asst. Surgeon~~	: DEVIKALA	Dis. Pack	: —
III Asst. Surgeon	:	Diathermy	: Used
Anaesthetist	: DR. SYLVESTER	C-Arm	: —
OT Nurse	: RADHIKA / CHRISTY	Arthroscopy	: —
Name of Surgery	: MVR Redo Ligation Open	Laproscopy	: —
MANMAN SAW DRILL USED heart		Sevoflurane / Isoflurane	: 3 hours
ETO RS1000/- TO BE CHARGE.		Inj. Fentanyl	: 2ml 10ml/inj. monphi:
		Others	1: 29mm mitral milton

MONITOR

Date	Start	Date	Disconnect
13/9/24	13.00	15/9/24	9.25

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
13/9/24	13.00	14/9/24	10.00

SYRINGE PUMP

Date	Start	Date	Disconnect
13/9/24	13.00	14/9/24	19.00
13/9/24	13.00	14/9/24	19.00

ALPHA BED

Date	Start	Date	Disconnect

SCD PUMP / VENTILATOR

Date	Start	Date	Disconnect
13/9/24	13.00	13/9/24	18.00

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
14/9/24	HB, Urea, creatinine, PT INR (11818)
15/9/24	HB, Urea, Creatinine, Na^+ K^+ (11893)
16/9/24	PT-INR (1927)
18/9/24	HB, UREA, CRT, NA^+, K^+ (2054), PT-INR (2054)

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

11/9/24	HRCT CHEST (1683) PAID IN RECEPTION		
13/9/24	CXR A/P B/S (11795)		
14/9/24	CXR A/P B/S (11818)		
15/9/24	CXR AP BS (11893)		
17/9/24	ECG, Echo, X-ray [1991]		

CBG

DATE	NUMBERS	DATE	NUMBERS
11/9/24	1 (1712)		
13/9/24	1 (2078)		
15/9/24	1 (11893)		

ABG

DATE	NUMBERS	DATE	NUMBERS
12/9/24	1 (1712)	13/9/24	3 (11795)
13/9/24	4 (01)(11795)		
13/9/24	3 (11795)		
14/9/24	1 (11818)		

ACT

DATE	NUMBERS
13/9/24	3 (01)(11795)

PHYSIOTHERAPY

Date	
13/9/24	18:00
14/9/24	10:00
15/9/24	10:00
16/9/24	10:45 / 15:00
17/09/24	10:45 / 16:30
18/09/24	10:30

NEBULIZER Neb - Foracort

DATE	NUMBERS	DATE	NUMBERS
13/9/24	1+	13/9/24	1+1+1
14/9/24	1+1+1+1	17/9/24	1+1+1
15/9/24	1+1+1+1		
16/9/24	1+1+1+1		
17/9/24	1+1+1+1		
18/9/24	1		

OTHERS

DATE	NUMBERS	DATE	NUMBERS

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
DR. DATESH	11/9/24	12/9/24	13/9/24	14/9/24	15/9/24	16/9/24	17/9/24
DR. Elakiya (pulmo)	11/9/24	12/9/24					
DR. pradeep (Anes)	12/9/24						
DR. RAJESH	18/9/24						
Ms. Catherine (Dietitian)	11/9/24	13/9/24	14/9/24	16/9/24	18/9/24		

PHARMACY	AMBULANCE
OT DRUGS REPLACED : BILL CLEARED : 112845 / [illegible] OT RETURNS CHECKED : 18/9/24.	CMU0025 - Valvereplacement 136500/- 18-09-24

CROSS MATCHING :

RESERVATION PF BLOOD : (2) (1) per Reservation done 12/9/24

STERILE TRAY USED : SR TRAY (1) no used in SICU on 14/9/24

TRANFUSION (BLOOD) : PRBC 2(U) (Added on pump)

ATTENDER'S HOLDING : SR TRAY (1) used

OTHER PROCDURES : ADTEE PROBE IN OT CHARGES (13/9/24)

Admission Officer : AARTHI

Sister In-charge