Dr. Nandamuri Taraka Rama Rao Vaidya Seva Trust

Dr NTR Vaidya Seva Trust
D.No. 241, MGM Capital Building,Near NRI Junction, Beside Little Village Restaurant,
Beside Little Village Restaurant,Chinnakakani,Mangalagiri, Guntur District,Pin: 522508.
Phone No:0863 - 2222802 / 2259861.

APPROVAL FOR CASHLESS FACILITY

Claim No. : APTRUST/KKD/2024/1/6232850

Date : 08/10/2024 11:19:23

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms PALLA MOHAN SRI MANIKANTA (the patient) on 03/10/2024 12:50:11 having Health/White/TAP/RAP card no. **JAP040902800055/04** and belonging to district **KAKINADA**, suffering from **IMPLANT REMOVAL** having given consent for **Removal of implants plates and nail (S5.8.1)** surgery/therapy is hereby AUTHORISED to undertake the procedure/treatment subject to the maximum package rate of **10000** and send the bills for the claim after the discharge.

Authorised Signatory

(Panel Doctor)

Panel Doctor

Name : Panel doctor (Dr NTR Vaidya Seva Trust)
Date: 03-Oct-2024 06:18 PM

Seal :

A/S → 10,000

BILLING CARD

A/S

MH/ PRINT / 0007 / BILL / FO

DOA - 8/10/24

Patient Name P. Mohan Sri Manikanta 45 M

D.O.A. 3/10/24 Time 3:35 PM

IP No. 522

A/S: (RT) Tibia nail Removal

Room No. Male general ward

Rent Per Day

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
3/10/24	4pm	ER	Male ward	P. Sandhya 0017
5/10/24	10:30 Am	M/W	OT	Vardhini (0090)
5/10/24	11:30AM	OT	SICU	mani 0003
5/10/24	5 pm	SICU	M/W	prasanna 0107

OPERATION THEATRE

Date	:	5/10/24	OT No.	:	I
Surgeon	:	Dr. suryaprasad	Start Time	:	10:30AM
I Asst. Surgeon	:	-	End Time	:	11:20AM
II Asst. Surgeon	:	-	Dis. Pack	:	-
III Asst. Surgeon	:	-	Diathermy	:	10:40AM to 10:50AM
Anaesthetist	:	Dr. Sandeep	C-Arm	:	10:50AM to 11:1AM
OT Nurse	:	Devi	Arthroscopy	:	-
Name of Surgery	:	(RT) Tibia Nail Removal	Laproscopy	:	-
			Sevoflurane / Isoflurane	:	-
			Inj. Fentanyl	:	-
			Others	:	-

MONITOR

Date	Start	Date	Disconnect
5/10/24	11:40AM	5/10/24	5pm

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect

SYRINGE PUMP

Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

Date	Start	Date	Disconnect

VENTILATOR

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 :

Date	LABORATORY

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

8/10/24 post op X-ray Rt Tibia

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Sujayaprasad	3/10/24	4/10/24	5/10/24	6/10/24	7/10/24	8/10/24	

PHARMACY

OT DRUGS REPLACED :-

BILL CLEARED : Consumable - 1240/- Medicine - 2141/- Return - (-)525/- = 2856/-

RETURNS CHECKED : Kumara 0099 08/10/24

AMBULANCE

Trans pvt - 100/-

Other Procedures : (specify) :-

Dressing done at 12 pm @ 8/10/24 (medium)

Admission Officer :

P. Vardhini (0090)
Sister In-charge