

**Dr. YSR Aarogyasri Health Care Trust****Dr. YSR Aarogyasri Health Care 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/VZG/2024/1/03292686

Date : 18/04/2024 10:18:11

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms Eadarada Dayamani (the patient) on 15/04/2024 12:33:11 having Health/White/TAP/RAP card no. **WAP0338011A0193/03** and belonging to district **VISHAKHAPATNAM**, 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 **17600** and send the bills for the claim after the discharge.

Authorised Signatory

(Panel Doctor)

Panel Doctor

Name : Panel doctor (Dr. YSR Aarogyasri
Health Care Trust)

Date: 15-Apr-2024 05:49 PM

Seal :

BILLING CARD

P/S -> 17600/-

Patient Name E. Dayamani; 29/FD.O.A. 15/4/24 Time 2:40PMIP No. 16470D.O.S. Implant RemovalRoom No. F/W.

Rent Per Day

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
15/4/24	3pm	ER	Female ward	P. Sandeep 0011
16/4/24	2:10pm	PLW	OT	R. Sandeep 0065
16/4/24	3:30pm	OT	EMR	Mari (0003)
16/4/24	6:00pm	EMR	FEMALE WARD	Chauhan

OPERATION THEA TRE

Date	: 16/4/24	OT No.	: I
Surgeon	: Dr. Suryaprasad	Start Time	: 2:30pm
I Asst. Surgeon	:	End Time	: 3:30pm
II Asst. Surgeon	:	Dis. Pack	:
III Asst. Surgeon	:	Diathermy	: 2:30pm to 3pm
Anaesthetist	: Dr. Sandeep	C-Arm	:
OT Nurse	: padma	Arthroscopy	:
Name of Surgery	: Implant Removal	Laproscopy	:
		Sevoflurane / Isoflurane	:
		Inj. Fentanyl	:
		Others	:

MONITOR**INFUSION PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
16/4/24	3:30pm	16/4/24	6:00pm				

OXYGEN**SYRINGE PUMP**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP**VENTILATOR**

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEA TRE

OPERATION THEA TRE	
Date :	OT. No. :
Surgeon : A.O.A.	Start Time :
I Asst. Surgeon :	End Time :
II Asst. Surgeon : Rent Per Day	Dis. Pack :
III Asst. Surgeon :	Diathermy :
Anaesthetist :	C-Arm :
OT Nurse :	Arthroscopy :
Name of Surgery :	Laproscopy :
	Sevoflurane / Isoflurane :
	Inj. Fentanyl :
	Others :

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