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/EGI/2024/1/04403003
Date : 30/04/2024 10:49:41

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms Sanni Sreenuvas Rao (the patient) on 26/04/2024 03:38:13 having Health/White/TAP/RAP card no. **WAP040710100365/01** and belonging to district **EAST GODAVARI**, 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: 27-Apr-2024 01:33 PM

Seal :

BILLING CARD

AS/- 17600/-

Patient Name Mr:- Sanni Sreenivas Rao, 50/M D.O.A. 26-4-24 Time

IP No. 179 "A" 358 - (4) Implant Removal (DHS) DOS-2-5-24

Room No. Gen Rent Per Day

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
26/4/24	4pm	EMR	Male ward	P. Sandya 0017
29/4/24	12:20pm	DMTW	OT	Christopher
29/4/24	1.50pm	OT	SICU	mani (0003),
29/4/24	6pm	SICU	M/W	Uma (0043)

OPERATION THEA TRE

Date	:	29/4/24.	OT No.	:	I.
Surgeon	:	Dr. suryaprasad	Start Time	:	1:05pm
I Asst. Surgeon	:	nill	End Time	:	1:50 pm.
II Asst. Surgeon	:	nill	Dis. Pack	:	nil
III Asst. Surgeon	:	nil	Diathermy	:	1:10 pm to 1:15pm.
Anaesthetist	:	Dr. sandeep	C-Arm	:	1:15pm to 1:30pm.
OT Nurse	:	padma	Arthroscopy	:	nill
Name of Surgery	:	(4) DHS Removal	Laproscopy	:	nill.
			Sevoflurane / Isoflurane	:	nil
			Inj. Fentanyl	:	nill.
			Others	:	nill.

MONITOR

Date	Start	Date	Disconnect
29/4/24	1.50pm	29/4/24	6pm

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 THEA TRE

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
26/4/24	CBC, CT, BT, BGT, RBS, Blood area, Creat-Re, T-Bilirubine, VDRLS ✓
28/4/24	HbA1c, OGTT - (paid by patient)

RADIOLOGY - ECG / ECHO / X-RA Y / USG / CT / MRI / DRP / BIO-DOPPLER			
26/4/24	ECG. Chest x-ray		
2/5/24	X-ray - Hip AP/LAT		

CBG			

CBG			

Date	PHYSIOTHERAPY

NEBULIZER			

NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Sreeprasad (Orthopaedic)	22/4/24	23/04/24	29/4/24	30/4/24	1/5/24	2/5/24	
Dr. Krishna Poudri	27/4/24 Paid by patient						

PHARMACY

OT DRUGS REPLACED :

BILL CLEARED : M. 1962 - C. 2247

RETURNS CHECKED : 4209 ✓ 10 0023

AMBULANCE

Trauma pat - 100/- ✓

Other Procedures : (specify) :-

2/5/24 Dressing done [Small] ✓

Admission Officer :

Sister In-charge