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/KSM/2024/1/6318486

Date : 04/05/2024 11:10:15

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms Yadla Saibabu (the patient) on 26/04/2024 03:18:38 having Health/White/TAP/RAP card no. **UHID10190626321/02** and belonging to district **KONASEEMA**, suffering from **URSL PLUS DJ STUNTING** having given consent for **Dj Stent -One Side (S9.3.6) ,ursl (S9.3.4)** surgery/therapy is hereby AUTHORISED to undertake the procedure/treatment subject to the maximum package rate of **27285** 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 04:10 PM

Seal :

A/S

BILLING CARD

A/s - 27285/-

DOD → 4/5/24

Patient Name: Yadla. Sai Babu D.O.A. 26/04/24 Time 04:25Pm

IP No. 180 "A" S/S of Rt URSL + DJ Stenting

Room No. male ward. Rent Per Day

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
26/4/24	4pm	EHR	Male ward	P. Sandya 0017
30/4/24	8:50Am	M/W to	OT	Asha 0093
30/4/24	11AM	OT	SICU	Mani
30/4/24	4PM	SICU to	M/W	Kumari

OPERATION THEATRE

Date :	30/4/24	OT No. :	I
Surgeon :	Dr. manikanta	Start Time :	9:40AM
I Asst. Surgeon :	Nill	End Time :	10:30AM
II Asst. Surgeon :	Nill	Dis. Pack :	Nill
III Asst. Surgeon :	Nill	Diathermy :	Nill
Anaesthetist :	Dr. Sandeep	C-Arm :	9:50Am to 10:AM
OT Nurse :	karuna	Arthroscopy :	Nill
Name of Surgery :	URSL + DJ Stunt	Laproscopy :	Nill
		Sevoflurane / Isoflurane :	Nill
		Inj. Fentanyl :	Nill
		Others :	

MONITOR / INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
30/4/24	11AM.	30/4/24	4:30Pm				

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

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, Creatinine, Blood urea,
	T. Bilirubin, Viral markers.

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

26/4/24	ECG, chest x-ray		
04/05/2024	USG Abdomen (out side Satya Scan Center		
04/05/24	KUB x-Ray		

CBG

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Manikantan (Urology)	26/4/24	30/4/24	3/5/24				

PHARMACY

OT DRUGS REPLACED : Consumable + 1825

BILL CLEARED : Medicines + 4299

RETURNS CHECKED : Bill 10 days

AMBULANCE

Transport ⇒ 100

Other Procedures : (specify) :-

(14) folyec catheter done at 10:30AM in OT 30/4/24

folyec Catheter Removed [3/5/24] at 11:30 Am.

Admission Officer : R. Vinod Kumar

Dr. Radhika AS 82

P. Vardhini (0090)
Sister In-charge