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/2024/1/04403725

Date : 03/05/2024 11:35:08

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms Pothu Durga Devi (the patient) on 29/04/2024 11:14:17 having Health/White/TAP/RAP card no. **WAP0483076A0453/03** 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: 29-Apr-2024 06:16 PM

Seal :

BILLING CARD

Ab- 17600/-

DOD:- 3/5/24

Patient Name Mrs. Pothu Durga Devi, 39y/F D.O.A 29/4/24 Time 12:29 P.M

IP No. _____

"D" Sps 8- (R) Tibia & Fibula (Implant Removal

Room No. Female ward Rent Per Day _____

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
29/4/24	18:30pm	Emr	Female ward	P. Sandhya 0017
30/4/24	2.40pm	F/w	OT	P. Vardhini (0090)
30/4/24	4pm	OT	SICU	Rani 0003.
30/4/24	10.20pm	SICU	Female ward	Kalyani

OPERATION THEA TRE

Date	: 30/4/24	OT No.	: T.
Surgeon	: Dr suryaprasad	Start Time	: 3pm
I Asst. Surgeon	: nil	End Time	: 4pm
II Asst. Surgeon	: nill	Dis. Pack	: nill.
III Asst. Surgeon	: nill	Diathermy	: 3:10pm to 3:30pm.
Anaesthetist	: Dr. Sandeep	C-Arm	: 3:15pm to 3:30pm
OT Nurse	: padma	Arthroscopy	: nil
Name of Surgery	: Tibia fibula plate Remove	Laproscopy	: nill
		Sevoflurane / Isoflurane	: nill
		Inj. Fentanyl	: nill
		Others	: nill

MONITOR

Date	Start	Date	Disconnect
30/4/24	4pm	30/4/24	10:00pm

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
29/4/24	CBC, CT, BT, BGT, Bloodsugar, Creatinine. T. Bilirubin, RBS. VDRL Markers.

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

29/4/24	ECG, chest x-ray		
3/5/24	Ankle AP/LAT X-ray		

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Surya prasad (Orthopedic)	29/4/24	30/4/24	1.5.24	2/5/24	3/5/24		

PHARMACY	AMBULANCE
OT DRUGS REPLACED :	
BILL CLEARED : TOTAL MED - 3151 → CONS - 1580 + 250 → MED - 1571	Transport - 60/-
RETURNS CHECKED :	

3/5/23

315/+250 = 340

Other Procedures : (specify) :-

3/5/24 dressing done [medium]

3/5/24 dressing done [medium]

P. Sandya
GDA

Admission Officer :	P. Vardhini (0090) Sister In-charge