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/AKP/2024/1/5820936

Date : 03/05/2024 11:17:10

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which ha admitted Mr/Ms BALLA GOWTHAM NAGA CHAITANYA (the patient) on 29/04/2024 11:45:36 having Health/White/TAP/RAP card n **WAP033800400173/04** and belonging to district **ANAKAPALLI**, suffering from **IMPLANT REMOVAL** having given consent f **Removal of implants plates and nail (S5.8.1)** surgery/therapy is hereby AUTHORISED to undertake the procedure/treatme 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 05:54 PM

Seal :

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

D/S -176001-

Patient Name Balla Gowtham Naga Chaitanya; 7/M D.O.A 29/4/24 Time 3:10 PM
DOD - 3/5/24

IP No. 190

"A" SRS - (LF) Both Bone Nail Removal

Room No. Male general ward

Rent Per Day

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
29/4/24	3:30pm	ER	Male ward	P. Sandhya 0017
1/5/24	10 AM	M/W	OT	Asha 0093
1/5/24	11:10AM	OT	SICU	Mani 0003
1/5/24	3:00PM	SICU	M/W	Mani 0003

OPERATION THEA TRE

Date	:	1/5/24.	OT No.	: I
Surgeon	:	Dr. suryaprasad	Start Time	: 10:10AM
I Asst. Surgeon	:	Nil	End Time	: 11AM
II Asst. Surgeon	:	Nil.	Dis. Pack	: Nil
III Asst. Surgeon	:	Nil	Diathermy	: 10:15AM 10:30AM
Anaesthetist	:	Dr. Sandeep.	C-Arm	: 10:15AM to 10:30AM
OT Nurse	:	Padma	Arthroscopy	: Nil
Name of Surgery	:	(LF) Both Bone Nail Removal	Laproscopy	: Nil
			Sevoflurane / Isoflurane	: Nil
			Inj. Fentanyl	: Nil
			Others	: Nil

MONITOR

Date	Start	Date	Disconnect
1/5/24	11.10AM	1/5/24	3:00pm

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, OT, BT, RBS, Blood urea, Creatinine, BGT T. Bilirubin, Viral markers.

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

29/4/24	ECG, chest x-ray		
3/5/24	Lt Forearm A/P Pat x-ray		

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Suryaprasad (Orthopaedic)	29/4/24	30/5/24	1/5/24	2/5/24	3/5/24		

PHARMACY

OT DRUGS REPLACED :

BILL CLEARED : Total Med. - 2809 - consu 970 + 250

RETURNS CHECKED :

3279
250
3529

AMBULANCE

Trauma pat - 120

Other Procedures : (specify) :-

2/5/24 dressing done [small]

3/5/24 dressing done [small]

P. Sandya 6017

Admission Officer :

P. Vardhini (0090)
Sister In-charge