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/2024/1/6318338/01

Date : 08/05/2024 10:51:47

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms Shaik Lalsaheb (the patient) on 29/04/2024 02:59:12 having Health/White/TAP/RAP card no. **WAP0432050A0138/02** and belonging to district **KONASEEMA**, suffering from **PCNL C DJ STENTING** having given consent for **Dj Stent -One Side (S9.3.6) ,PCNL (S9.3.2)** surgery/therapy is hereby AUTHORISED to undertake the procedure/treatment subject to the maximum package rate of **38700** 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: 30-Apr-2024 03:02 PM

Seal :

MH/ PRINT / 0007 / BILL / FO

-387001-

BILLING CARD

Patient Name Shaik Lalsaheb 50/M D.O.A. 29/4/24 Time 3:17PM

IP No. 191 Dx:- Renal calculi DOD:- 8/5/24

Room No. Male general ward Rent Per Day 1800/-

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
29/4/24	3:30pm	EMR	Male ward	Tulasi ows
4/5/24	8:15Am	M/W	OT	Sandhya
4/5/24	10:20 AM	OT.	SICU	mani 0003
4/5/24	3:15PM	SICU	M/W	mani 0069

OPERATION THEA TRE

Date	:	4/5/24	OT No.	:	I.
Surgeon	:	Dr. manikanta	Start Time	:	9:15Am
I Asst. Surgeon	:		End Time	:	10:15 AM
II Asst. Surgeon	:	-	Dis. Pack	:	-
III Asst. Surgeon	:	-	Diathermy	:	-
Anaesthetist	:	Dr. Sandeep	C-Arm	:	9:30 Am to 9:45 AM
OT Nurse	:	Karuna	Arthroscopy	:	-
Name of Surgery	:	URSL Dj stent	Laproscopy	:	-
			Sevoflurane / Isoflurane	:	-
			Inj. Fentanyl	:	-
			Others	:	

MONITOR

Date	Start	Date	Disconnect
4/5/24	10.30AM	4/05/24	3:15Pm.

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, ~~BT~~ creatine, Blood urea, Total Bilirubin, viral Markers

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

29/4/24	ECG, Chest x-ray		
8/5/24	KUB xray, Ultrasoundabdomen		

CBG

2/5/24	1+1		

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Manikandan sir (Urologist)	30/4/24	3/5/24	4/5/24				

PHARMACY

OT DRUGS REPLACED : CONSUMABLE + 1450

BILL CLEARED : MEDICINE + 3899

RETURNS CHECKED : INDENTS - NIL 5349

AMBULANCE

Transport ₹ 100/-

Other Procedures : (specify) :-

(14) Foley's catheter done at 10:15 AM in OT on 4/5/24

Foley's catheter Remove at 7 AM on 7/5/24

Admission Officer : R. Vinod Kumar

P. Vardhini (0090)
Sister In-charge