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/KKD/2024/1/6229019

Date : 03/06/2024 11:02:31

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms barre venkateswarudu (the patient) on 28/05/2024 11:56:33 having Health/White/TAP/RAP card no. **RAP041900404558/04** and belonging to district **KAKINADA**, 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: 28-May-2024 06:40 PM

Seal :

A/s

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

A/s → 17600/-

Patient Name Bavve. Venkateswarudu; 9/M

DOD - 3/6/24

D.O.A. 28/5/24 Time 1:10 PM

IP No. 250

ASIS (4) FOREARM IMPLANT REMOV

Room No. Male general ward

Rent Per Day

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
28/5/24	2pm	EMR	Male ward	P. Sandya 0017
31/6/24	10:30 Am	male ward	OT	Sridevi 0041
1/6/24	11:10 Am	OT	SICU	mani 0003
1/06/24	1:30 Pm	SICU	M/W	Mani 0069

OPERATION THEA TRE

Date	:	1/6/24	OT No.	: I.
Surgeon	:	Dr - suryaprasad.	Start Time	: 10:35 Am
I Asst. Surgeon	:	-	End Time	: 11 Am
II Asst. Surgeon	:	-	Dis. Pack	:
III Asst. Surgeon	:	-	Diathermy	: 10:40 Am to 11 Am
Anaesthetist	:	Dr. Sandeep	C-Arm	: 10:50 nm to 11 Am
OT Nurse	:	Padma.	Arthroscopy	: -
Name of Surgery	:	(LR) Radius plating Removal	Laproscopy	: -
			Sevoflurane / Isoflurane	: -
			Inj. Fentanyl	: -
			Others	: -

MONITOR

Date	Start	Date	Disconnect
31/06/24	11:15 AM	1/06/24.	1:30 Pm

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
28/5/24	Hb% [redacted] SURGICAL PROFILE

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

28/5/24	chest x-ray		
31/5/24	lt Radius Ap/LAT		

CBG

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Suraj. Prasad (Orthopedic)	28/5/24	29/5/24	30/5/24	31/5/24	1/6/24	2/6/24	3/6/24

PHARMACY	AMBULANCE
OT DRUGS REPLACED : OT CONSUMBLE + 1050 BILL CLEARED : MEDICINE + 1520 RETURNS CHECKED : IMPLANTS + 0 2570	Transport - 100

Other Procedures : (specify) :-

Dressing done at 3/6/24 (Small)

Admission Officer : R. Vinod Kumar

P. Vardhini (0090)
Sister In-charge