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/2024/1/5821507

Date : 31/05/2024 14:47:06

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms CHALIKE PADMA (the patient) on 27/05/2024 10:58:39 having Health/White/TAP/RAP card no. **JAP033800400155/01** and belonging to district **ANAKAPALLI**, 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 11:30 AM

Seal :

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

A/S - 17600
DOD → 31/5/24

Patient Name CHALIKE PADMA ; 33/F D.O.A. 29/5/24 Time 12:09 PM

IP No. 244 "A" SPS:- (LF) Tibia Nail & Fibula plate Removal

Room No. Female general ward Rent Per Day

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
27/5/24	12:35pm	EMR	Female ward	P. Sandya 80/7
29/5/24	10:40AM	PW	OT	Cheel
29/5/24	12:00pm	OT	SICU	mani 0003.
29/5/24	6pm	SICU	Female ward	Kumari 001

OPERATION THEA TRE

Date	29/5/24	OT No.	I
Surgeon	Dr. Suryaprasad	Start Time	11AM
I Asst. Surgeon	-	End Time	12:15pm
II Asst. Surgeon	-	Dis. Pack	-
III Asst. Surgeon	-	Diathermy	11:10Am to 11:30AM
Anaesthetist	Dr. Sandeep	C-Arm	11:30Am to 11:40AM
OT Nurse	padma	Arthroscopy	-
Name of Surgery	(LF) Tibia nail, fibula plate Removal	Laproscopy	-
		Sevoflurane / Isoflurane	-
		Inj. Fentanyl	-
		Others	

MONITOR

Date	Start	Date	Disconnect
29/5/24	12:00pm	29/5/24	6pm

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

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

27/5/24	ECG, chest x-ray		
28/5/24	lt Ankle Ap x-ray		
31/5/24	Lt leg Ap/LAT		

CBG

CBG

PHYSIOTHERAPY

Date	

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Sangaprasad (Orthopedics)	27/5/24	28/5/24	29/05/24	30/05/24	31/5/24		

PHARMACY	AMBULANCE
OT DRUGS REPLACED : –	Transport = 150/–
BILL CLEARED : CONS :- 1625/- MED :- 1631/-	
RETURNS CHECKED : Return :- (-) 180/- Rs 3076/- ✓ Clear 31/5/24	

Other Procedures : (specify) :-

30/05/24 [small] dressing done

31/5/24 dressing done [small]

Admission Officer : R. Vinod Kumar

Dr. Ratna NS

P. Vardhini (0090)
Sister In-charge