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/VZG/2024/1/03312165

Date : 13/06/2024 10:52:03

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms BODDA NAGA BABU (the patient) on 11/06/2024 10:45:27 having Health/White/TAP/RAP card no. **RAP034004400792/01** and belonging to district **VISHAKHAPATNAM**, suffering from **FRACTURE METACARPAL LEFT** having given consent for **Internal Fixation of Small Bones (S5.1.32)** surgery/therapy is hereby AUTHORISED to undertake the procedure/treatment subject to the maximum package rate of **18300** 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: 11-Jun-2024 02:37 PM

Seal :

A/s

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

A/s → 183001-

Patient Name Bodla. Nagababu

DOD:-13/6/24

D.O.A. 10/06/24 Time 10:44pm

IP No. 267

Dsis: left hand metacarpal #

Room No. male general ward

Rent Per Day

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
10/6/24	11:30pm	EMR	Male ward	D.Tulasi (GNS)
11/6/24	3:2pm.	m/w	OT	Sandya
11/6/24	4:20pm	O.T.	I.C.U	Karuna.
11/6/24	7Pm	SICU	M/W	Syamala GNS

OPERATION THEA TRE

Date	:	11/6/24	OT No.	:	I.
Surgeon	:	Dr. Suryaprasad	Start Time	:	3:30 pm
I Asst. Surgeon	:	-	End Time	:	4:15 pm
II Asst. Surgeon	:	-	Dis. Pack	:	-
III Asst. Surgeon	:	-	Diathermy	:	3:40pm to 4pm
Anaesthetist	:	Dr. Samdeep	C-Arm	:	3:40pm to 4:10pm.
OT Nurse	:	Karuna	Arthroscopy	:	-
Name of Surgery	:	left. metacarpal. K-wire fixation	Laproscopy	:	-
			Sevoflurane / Isoflurane	:	-
			Inj. Fentanyl	:	-
			Others	:	

MONITOR

Date	Start	Date	Disconnect
11/6/24	4:20P~	11/6/24	7Pm

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			
10/6/24	ECG, Chest X-ray		
13/6/24	Upper Extremeties Lt Hand Ap		

CBG				CBG			

Date	PHYSIOTHERAPY

NEBULIZER				NEBULIZER			

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Surya prasad sir (orthopedic)	10/6/24	11/6/24	12/6/24	13/6/24			

PHARMACY	AMBULANCE
OT DRUGS REPLACED : -	/ Transport - 150/-
BILL CLEARED : CONS:- 180/- MED:- 2259/- IMP:- 96/-	flow 055 13/6/24
RETURNS CHECKED : Rs 4,164/- → Miscellaneous	

Other Procedures : (specify) :-

Dressing done at 13/6/24. (Small)

Admission Officer : R. Vinod Kumar | Jr. Rahim NS | P. Vardhini (0090) Sister In-charge