Aarogyasri Health Care Trust

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/WGI/2024/1/05303660

Date : 13/07/2024 13:19:23

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms Soda Dasi Sundara Kantam (the patient) on 06/07/2024 12:56:47 having Health/White/TAP/RAP card no. **YAP054405100094/02** and belonging to district **WEST GODAVARI**, suffering from **FRACTURE MALLEOLUS** having given consent for **Fracture - Ankle Internal Fixation Bi/Tri Malleolar (S5.1.46)** surgery/therapy is hereby AUTHORISED to undertake the procedure/treatment subject to the maximum package rate of **45000** and send the bills for the claim after the discharge.

Authorised Signatory

(Panel Doctor)

Panel Doctor

Name : Panel doctor (Aarogyasri Health Care Trust)
Date: 08-Jul-2024 02:07 PM

Seal :

Authorised Signatory

(Aarogyasri Health Care Trust)

Trust Doctor

Name : Trust doctor (Aarogyasri Health Care Trust)
Date: 08-Jul-2024 02:16 PM

Seal :

2088/-

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

A/s → 45000

DOD - 13/7/24

Patient Name Mrs. Sodadasi Sundara Kanthem, 73y/F D.O.A. 06/07/24 Time 1:14 PM

IP No. 318

'A' SRS S- (Lt) BP- Malleolar #

Room No. Female ward.

Rent Per Day

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
6/7/24	1:30pm	EMR	Female ward	P. Sandhya 0017
9/7/24	2pm	F/w	OT	P. Vardhini (0090)
9/7/24	4:PM	OT	SICU	mani 0003
9/7/24	10:40Pm	SICU	F/w	Syamala.

OPERATION THEATRE

Date	9/7/24	OT No.	I
Surgeon	Dr. Suryaprasad	Start Time	2:30 PM
I Asst. Surgeon	-	End Time	3:40 pm
II Asst. Surgeon	-	Dis. Pack	-
III Asst. Surgeon	-	Diathermy	2:40pm to 3:30pm
Anaesthetist	Dr. Sandeep	C-Arm	2:45pm to 3:30PM
OT Nurse	Devi	Arthroscopy	-
Name of Surgery	(Lt) fibulaplating medial malleolus screw.	Laproscopy	-
		Sevoflurane / Isoflurane	-
		Inj. Fentanyl	-
		Others	-

MONITOR

Date	Start	Date	Disconnect
9/7/24	4:10 pm	9/7/24	10 pm

INFUSION PUMP

Date	Start	Date	Disconnect

OXYGEN

Date	Start	Date	Disconnect
9/7/24	4 30pm	9/7/24	10 Pm.

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

6/7/24	ECG, chest x-ray		
8/7/24	2D Echo → Screening purpose 300/-		
13/7/24	post op X-ray		

CBG

9/7/24	1		

CBG

Date	PHYSIOTHERAPY

NEBULIZER

NEBULIZER

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
dr. Surya prasad	6/7/24	7/7/24	8/7/24	9/7/24	10/7/24	11/7/24	12/7
DR: N.S. prasad	13/7/24						

PHARMACY

OT DRUGS REPLACED :
BILL CLEARED : MED:- 2868/-
RETURNS CHECKED : Cons:- 1703/-
Implts:- 2088/-
6165
Kiruma 0099 13107

AMBULANCE

Transport : 100/-

Other Procedures : (specify) :-

7/7/24 Bly's Done at 7Pm

10/7/24 dressing doe [medium]

13/7/24 dressing done at 11Am (medium)

Admission Officer

P. Vardhini (0090)
Sister In-charge