Dr NTR Vaidya Seva Trust

Dr NTR Vaidya Seva 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. : APCMCO/AKP/2024/1/5822562

Date : 29/07/2024 09:33:12

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which ha admitted Mr/Ms DULLA TEJ KUMAR (the patient) on 23/07/2024 01:35:49 having Health/White/TAP/RAP card nc **CMCO/APS148807/2024** and belonging to district **ANAKAPALLI**, suffering from **FRACTURE RADIUS RIGHT** having given conser for **Distal Radius Fracture - Forearm (S5.1.22)** surgery/therapy is hereby AUTHORISED to undertake the procedure/treatmer subject to the maximum package rate of **25000** and send the bills for the claim after the discharge.

Authorised Signatory

(Panel Doctor)

Panel Doctor

Name : Panel doctor (Dr NTR Vaidya Seva Trust)
Date: 23-Jul-2024 11:16 PM

Seal :

MH/ PRINT / 0007 / BILL / FO

BILLING CARD

A/S-725000

DOD:-29/9/24

Patient Name Dulla. Tej Kumar; 14/M D.O.A. 22/7/24 Time 3:44PM

IP No. 350

Room No. Male general ward Rent Per Day

TRANSFER DET AILS

Date	Time	From	To	Sister Signature
22/7/24	3:50PM	EMR	M/W	sudha.
24/7/24	11Am	M/W	OT	Sandhya
24/7/24	12:45PM	OT	STCU	mani 0003
24/7/24	3:20PM	SICU	M/W	mani 0069

OPERATION THEA TRE

Date	:	24/7/24	OT No.	: I
Surgeon	:	Dr. Suryaprasad	Start Time	: 11:30AM
I Asst. Surgeon	:	-	End Time	: 12:45PM
II Asst. Surgeon	:	-	Dis. Pack	: -
III Asst. Surgeon	:	-	Diathermy	: 11:40AM to 12PM
Anaesthetist	:	Dr. sandeep.	C-Arm	: 11:40AM to 12:15PM
OT Nurse	:	karuna	Arthroscopy	: -
Name of Surgery	:	(RT) Radius nailing	Laproscopy	: -
			Sevoflurane / Isoflurane	: -
			Inj. Fentanyl	: -
			Others	: -

MONITOR

Date	Start	Date	Disconnect
24/7/24	12:45Pm	24/07/24	3:20Pm.

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			
29/7/24	Rt Radius Aplast (post-op)		

CBG			CBG		

Date	PHYSIOTHERAPY

NEBULIZER			NEBULIZER		

CONSULTANT NAME	Date	Date	Date	Date	Date	Date	Date
Dr. Surya prasad	23/7/24	24/7/24	25/7/24	26/7/24	27/7/24	28/7/24	29/7/24

PHARMACY

OT DRUGS REPLACED : –

BILL CLEARED : CONSU :- 1113/-
Impl :- 1800/-
MED :- 1786/-
4699/-

RETURNS CHECKED :

Nagalaxmi 0098 29/7/24

AMBULANCE

Transport 1000

Other Procedures : (specify) :-

25/7/24 dressing done [medem]

29/7/24 dressing done [medem]

Admission Officer :

Sister In-charge