

**Dr. Nandamuri Taraka Rama Rao 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. : APTRUST/EGI/2024/1/04450665

Date : 02/09/2024 11:32:40

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms Pandi Pandurangarao (the patient) on 24/08/2024 11:18:09 having Health/White/TAP/RAP card no. **WAP040710200133/01** and belonging to district **EAST GODAVARI**, suffering from **HIP FRACTURE** having given consent for **Neck Femur - ORIF Intertrochanteric / Sub Trochanteric Fracture with Dynamic Hip Screw or PFN (S5.1.44)** surgery/therapy is hereby **AUTHORISED** to undertake the procedure/treatment subject to the maximum package rate of **32900** 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: 24-Aug-2024 03:12 PM

Seal :

A/S

A/S → 32900



BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name P. Panduranga Rao 85/mD.O.B. 02/09/24IP No. 410D.O.A. 23/08/24 Time 05:28pmRoom No. male General wardA S/S HP # (Rt)

Rent Per Day _____

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
23/8/24	5:10pm	Emr	M/W	Sudha
24/8/24	3:30pm	M/W	SICU	Chaitanya
26/8/24	7:30pm	SICU	M/W	Udayalakshmi
29/8/24	10:30am	M/W	OT	Chaitanya
29/8/24	1:50pm	OT	SICU	manu 0003
24/08/24	8:00pm	SICU	M/W	manu 0069

OPERATION THEATRE

Date:	29/8/24	OT No.:	I
Surgeon:	Dr. Suryaprakash	Start Time:	11:40pm
Asst. Surgeon:	-	End Time:	1:30pm
II Asst. Surgeon:	-	Dis. Pack:	-
III Asst. Surgeon:	-	Diathermy:	12pm to 12:30pm
Anaesthetist:	Dr. Sandeep	C-Arm:	12pm to 1:pm
OT Nurse:	Devi	Arthroscopy:	-
Name of Surgery:	(Rt) DHS	Laprosopy:	-
		Sevoflurane / Isoflurane:	-
		Inj. Fentanyl:	-
		Others:	-

MONITOR

INFUSION PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect
26/8/24	4pm	26/8/24	7pm				
27/08/24	4pm	27/08/24	7:10pm				
29/8/24	2pm	29/8/24	8:00pm				

OXYGEN

SYRINGE PUMP

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

ALPHA BED / SCD PUMP

VENTILATOR

Date	Start	Date	Disconnect	Date	Start	Date	Disconnect

OPERATION THEATRE

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

23/8/24. ELECTROLYTES, (Tropin - I, paid)
 24/8/24 HB%
 21/8/24 Serum Electrolytes

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

2/9/24 post op x-ray

CBG

CBG

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

