

**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, Chinnakani, Mangalagiri, Guntur District, Pin: 522508.
Phone No: 0863 - 2222802 / 2259861.

APPROVAL FOR CASHLESS FACILITY

Claim No. : APTRUST/EGI/2024/1/04461551

Date : 28/09/2024 10:22:02

The network hospital **SANJIVI INSTITUTE OF ORTHOPAEDICS AND SUPERSPECIALITIES PVT.LTD** Code SIO-KKD which has admitted Mr/Ms Gadi Chakram (the patient) on 20/09/2024 04:16:19 having Health/White/TAP/RAP card no. **WAP042002900089/02** and belonging to district **EAST GODAVARI**, suffering from **FRACTURE BIMALLEOLAR** 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 (Dr NTR Vaidya Seva Trust)

Date: 21-Sep-2024 12:21 PM

Seal :

Authorised Signatory

(Dr NTR Vaidya Seva Trust)

Trust Doctor

Name : Trust doctor (Dr NTR Vaidya Seva Trust)

Date: 21-Sep-2024 12:59 PM

Seal :

A/S

A/S → 45000



BILLING CARD

MH/ PRINT / 0007 / BILL / FO

Patient Name G. G. Chakravarthy; 73 / M

DOB: 28/9/24

D.O.A. 20/9/24 Time 1:54 PM

IP No. 483

Wk Sp: - (14) Fibula #

Room No. Male general ward

Rent Per Day _____

TRANSFER DETAILS

Date	Time	From	To	Sister Signature
20/9/24	2 AM	EMR	Male ward	P. Sandhya 0017
23/9/24	4:30 PM	M/W	OT	Bhai day
24/9/24	8:15	M/W	OT	Bhai
24/9/24	11: AM	OT	SICU	mami 0003
24/9/24	4:30 PM	SICU	M/W	syamle

OPERATION THEATRE

Date :	24/9/24	OT No. :	I
Surgeon :	Dr. Arun Kumar	Start Time :	8:30 AM
I Asst. Surgeon :	-	End Time :	11: AM
II Asst. Surgeon :	-	Dis. Pack :	-
III Asst. Surgeon :	-	Diathermy :	8:40 AM to 9:30 AM
Anaesthetist :	Dr. Sandeep	C-Arm :	8:40 AM to 10: AM
OT Nurse :	Devi	Arthroscopy :	-
Name of Surgery :	(18) fibula plating medial malleolus screw fixation	Laproscopy :	-
		Sevoflurane / Isoflurane :	-
		Inj. Fentanyl :	-
		Others :	-

MONITOR

Date	Start	Date	Disconnect
24/9/24	11:40 AM	24/9/24	4:30 PM

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 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 :

[illegible]

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

28/9/24 post op X-ray Lt Fibula

CBG

CBG

29/9/24

4

1

Date

PHYSIOTHERAPY

NEBULIZER

NEBULIZER

