

RCWH.0000219558 IP5-00175610
Baby MOORTHALA VEDANSHI
06-05-2011 15 Y 1 M 28 D (F)
Dr. DR.V.V.R.SATYA PRASAD



Rainbow
Children's
Hospital
It takes a lot to treat the little.

BirthRight™
BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

SURGERY DETAILS

80967

Date: 4/7/26
Patient Name: B. Moorthala Vedanshi Date of Birth: 6/5/2011 Age: 1.57

Gender: F Ward: P.O.T UHID No.: 218558

Date of Surgery: 4/7/26 ☐ OT-1 ☐ OT-2 ☐ OT-3 ☒ OT-4 ☐ OBG OT-1 ☐ OBG OT-2

Name of the Surgery: Laparotomy + Omentectomy + CAPD catheter insert

Time in: 3 PM Time Out: 5 PM

ACD
ash
Entered

PAB-29

	NAME	AMOUNT
1. Surgeon	Dr. Nabeel	SR 45740
2. Anaesthetist	Dr. Suvarna TESS	AE 13722
3. Assistant Surgeon		OT - 36592
4. OT Technician	Ramesh - 4	
5. Circulating Nurse	Samon	
6. Assistant Nurse	Susata	

Special Equipment: ☐ Laparoscopy ☐ Bronchoscope ☐ Harmonic ☐ Morcelator
☐ C-ARM ☐ Cystoscopy ☐ Versa Point ☐ Liver Cusa
☐ Neuro Cusa ☐ Others

Signature of the Surgeon

Signature of Circulating Nurse

Order No: 9687853

Order by: Y. Ramaferi



CONSUMABLES OF OT



Technician : Date : Time :

Anaesthesia Disposables		Qty		Surgical Disposables		Qty		Disposables (Baby Side)		Qty	
Issued	Used	Issued	Used	Issued	Used	Issued	Used	Issued	Used	Issued	Used
ET tube 6.6.5	14	—	Major Pack	1	1	Inj Vit.K					
LMA 3.9.2	14	14	Sutures 5003-5085	242		Cord Clamp					
ECG leads A/P/N	5	—	9915 (2437)	2	1	Suction Catheter					
HME filter A/P/N	01	1	5331 (8120.0)	2	1	Feeding Tube					
Syringes : 10 cc	10	5	Vic 1.0 (1205)	2	244	Vaccum Suction Set					
05 cc	10	6	Gloves 6.6.5-7.7.5	242	—	Surgical Gloves					
02 cc	10	4	(6.6.5 7.7.5)	242	341	Gauze Pack					
01 cc						Syringe 1ml / 2ml					
Cautery plate : A / P / N	1	1	Surgical blade 15	1	1	Surgical Blade # 20					
IV set	01	—	NG tube			Koochies (S)					
RL	01	—	Cautery pencil	1	1	NS 500ml	1	1			
NS : 100ml / 100ml / 500ml / 1000ml	54	1	Koochies XL Adult	1	1	Transo fix	1	1			
Nice spike	01	0	Ointments			Jelly	1	1			
Quartz	03	—	Suction Catheter			10cc 5cc	242	2			
Fentanyl	01	1	Cap, Mask	515	144	0.25% Anakin	1	1			
Morphine			Gauze Pack (RAN)	242	142	Monoxyl 2.0	1	1			
Ketamine			Mop Pack	1	2	Vic 3.0	1	1			
Propofol	03	2	Steristrip			Tenacoff (A)	1	1			
Rocuronium	01	—	Underpad	1	1						
Glycopyrolate	01	0	Draw sheet			Nislar	01	1			
Myopyrolate	01	1	Abgel			Nobel Apray					
Ondansetron	01	1	Foleys catheter			26128	14	—			
Pencan 25g / Spinal Needle 22	014	—	Urobag			oral Apray					
Bupivacaine 0.25%	01	—	Chest Drainage Catheter			213	14	—			
Bupivacaine 0.25%(Heavy)			Romodrain bag			50 cc pholice	14	—			
Antibiotics			Bandage			AV cables					
O2 mask (N)	01	—	Tegaderm			18.20	14	—			
Suppositories			Ioban								
Anamol : 80mg / 250mg / 170 mg			Double J Stent			ATRACURUM	242	3			
Supridol : 100mg	01	—	Vaccum Suction set	1	1						
Justin : 12.5 mg / 25mg / 100mg	142	—	Plastic Bed Sheet	1	—						
Tab. Misoprost : 200mg			Betadine Solution	1	1						
Vaccines	01	1	Microshield	1	1						
Dexat + Dexamsole	14	—	Cotton Balls	1	1						
Tranaxa + (PAB)	14	1	Latex Gloves	108	108						
Gloved Hecan	54	—	Ramdione Scrub								
Vacc Hecan	14	—	Saral								

12/2/82

Chas. Colby, Placenta

St. Joseph's Hospital
Rainbow Children's Hospital

CONSUMABLES OF OT

OT	Disposables (Baby, Bed)	Medical Disposables	OT	Disposables (Baby, Bed)	Medical Disposables
1	1	1	1	1	1
2	2	2	2	2	2
3	3	3	3	3	3
4	4	4	4	4	4
5	5	5	5	5	5
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100	100	100	100	100	100

Handwritten notes and signatures on the right side of the page, including dates and names.

ESTIMATION SLIP

CFC for only procedure cost

Date : 02/07/2026 UHID / IP No. : RCWH.0000219558 ST No. 80967

Name of Patient : Baby. Morethabi. Kedanshi Age: 15y Gender: F

Father's / Husband's Name : Mr. M. Kishore Reddy Corporate / Occupation : Business

Address : _____ Phone : 917 7214141 / 9989395749 Email: _____

Procedure / Plan : Medialux + Tension of catheter placement.

MODE OF PAYMENT : ☒ SELF ☐ TPA : _____ ☐ GIPSA : _____ OTHERS : _____

TARIFF INFORMATION : Dr. H/J 01/0002 PAB-29/29

ROOM CATEGORY	GW	SW	TSW	PR	DLX	SDLX	NICU	PICU	MICU	DAY CARE
Room Rent & Nursing Charges										
Doctor's Fee			✓	✓		51932		15248		30496
L. Tax								12196		26300

PARTICULARS		AMOUNT (₹)	
Surgeon's / Anesthetists's Fee / O.T. Charges	Tsw.	51932	15248
O.T. Consumables	→ 7500	Subject to approval by TPA / Insurance Company	
Instrument Charges		Not Covered by TPA / Insurance company	
Pharmacy, Consumables & Investigations	Extensive	As per actual - Not Included in Estimation	
Equipment Charges	Monitor :	Oxygen :	Infusion pump / Syringe pump :
	Ventilator :	Conventional :	HFO-SLE 5000 :
	Phototherapy :	Single Surface :	Double Surface :
Blood/ Blood products / Implants / IP or OP Procedures / Cross Consultations, Etc.	Extensive	As per actual - Not Included in Estimation	
Package			
Others			
Initial Minimum Deposit	Appx. 1,35,000	E. I. J. Reun. Chenn	

- REMARKS:**
- The estimated amount may change according to duration of stay, medical condition, investigations, pharmacy and any other procedure.
 - The estimated surgical charges may vary subject to surgeon's decisions / Complications / Patient's requirements / Mode of Procedure (Like Laparoscopic, Thoracoscopic, etc) / Unilateral to Bilateral Procedure.
 - In case the patient is shifted from lower category to higher category, all charges for the consultant visit, investigations, operations and/or procedures from the date of admission will be according to the higher category.
 - Room eligibility is purely subject to TPA approval and the package/Room tariff starts from the time of admission.
 - Proportionate difference of bill amount is applicable in case the patient opts for a category higher than the TPA approved, which has to be paid by the patient and may not be reimbursed by the TPA/Insurance Company at later stage.
 - For Non-Medicals, Disposables, Consumables, Infusion Pump, Taxes, Implants, HIV/HbsAg, Medical Records, Double Occupancy and Registration Charges, etc, credit cannot be extended. These items are not payable to us as per Insurance Company norms.
 - During Non-working hours of O.T (8:00 PM to 7:00AM), Sundays & Public Holidays, 30% extra charges are applicable on surgical cost, and this is not covered by TPA/Insurance company. In case the length of stay is beyond the package permitted, additional payment is applicable, for which kindly contact the Financial Counseling desk between 9am to 6pm
 - Difference, if any between the final bill amount and amount permitted/ approved by the TPA or total bill amount in case of denial from TPA has to be paid by the patient. In case of denial, cash tariff would be applicable.
 - Two attendants are permitted with patients in SDLX, DLX and PVT Rooms and only one is permitted in the rest of the categories of rooms. And no attendant is permitted in ICU's. Kindly check your billing status on day to day basis at IP Billing Department.

DECLARATION

I, Mr. Shrinivas Shankar have attended the Financial Counseling desk and understood the expected costs and other conditions applicable. In case the TPA/Insurance Company rejects the claim for whatsoever reasons at any point of time after discharge, I promise to settle the claim with the hospital

Signature of the Client : _____ Signatory Relationship : _____ Signature of the Financial Counselor : _____