

माने हॉस्पिटल

प्रसूतीगृह व स्त्री रुग्णालय

दत्त चौक, यवतमाळ ☎ 07232- 246697, 246698
Hosp. Reg. No. YTL/170

DISCHARGE CARD

डॉ. सौ. वृषाली गिरीश माने

रजि. नं. 2001/10/3301

M.B.B.S., D.G.O. (मुंबई)

D.S.A.M.S. (नवी दिल्ली)

FICOG

डॉ. गिरीश रामराव माने

रजि. नं. 081931

M.B.B.S., D.G.O. (मुंबई)

M.D. (USAIM)

FICOG

स्पेशालीटी : बिना टाक्याची गर्भपिशवी काढण्याची शस्त्रक्रिया

NAME : Mrs. Rohini Kapil Sakharam

Sawankar

AGE : 25 yrs.

ADDRESS : Gurukrupa Nagar, Wadgaon,
Road, Yavatmal.

Diagnosis : Primi @ 9MA for inductⁿ & labour.

Date of Admission : 15.06.23 Time : 1.15 pm

Date of Discharge : 19/06/23 Time : 12 PM

Management : _____

Elective LSCS for
failure of induction.



Hb % 10.6 gm.

Blood Group - B +ve

V.D.R.L. - Neg

HbsAg - Neg

Sr. Urea - mg%

Sr. Bilirub - mg%

SGOT - iu/Lit

E.C.G -

U.S.G. -

TSH -

Tridot - NR

B.S.L. - mg%

Sr. creat - mg%

Sr. Uric acid -

SGPT - iu/Lit

X-RAY -

HbA₁C

Urine :
 Alb- trace
 Sug- nil
 Micro-

OPERATION / ~~DELIVERY~~ NOTES :-

↓ SA ↓ AAP CP&D done. Pfannenstiel incision.

16.06.23 | MCh | NO PP4 | Coiled well
2.04 pm | 3.0 kgs | No tear | Liquor clear

Dr. P.D. Agrawal.

TREATMENT GIVEN :-

IVF RL / DNS / D5

Inj. Ceftriaxone + Salbactam 1.5 gm. IV 12 hrly.

Inj. Rantidine HCL 2cc IV 12 hrly.

Inj. Ondansetron 2cc IV 12 hrly.

Inj. Gentamycin 80 mg IV 12 hrly.

Inj. Metrogyl 100 cc IV 12 hrly.

Inj. Diclofenac Sodium IV 12 hrly.

CONDITION ON DISCHARGE :-

GC - Fair

afeb

SpO₂ - 100%.

PR - 90/min

BP - 110/70

RS - (NAD)

CVS -

Breast - @

P/A - ut. involuting

P/V - No active bleeding

Bowel / Bladder - Achieved @ habits.



DR. VRISHALI GIRISH MANE

R.N. 2001/10/3301 M.B.B.S, D.G.O.,

DSAMS, FICOG

DATTA SQUARE, YAVATMAL (MS)

- पाणी जास्त पिणे.
- १० दिवसांनी तपासणी साठी येणे.
- बाळाचे लसीकरण वेळेवर करणे.
- दिड महीन्यांनी तपासण्यासाठी येणे.
- ४ ते ६ महिने बाळाला केवळ आईचेच दुध द्यावे.

FOLLOW UP :-

- हे कार्ड जपून ठेवावे व प्रत्येक वेळी सोबत आणावे. •

MANE HOSPITAL

Hosp. Reg.No. YTL/170
Datta Square, Yavatmal 445001 (M.S.)

857

Dr. Vrishali G. Mane
M.B.B.S., D.G.O., D.S.A.M.S., F.I.C.O.G
Reg.No. 2001/10/3301

RECEIPT

Dr. Girish R. Mane
M.B.B.S., D.G.O., F.I.C.O.G.
Reg.No. 081931

Name of Patient Mrs. Rohini Ravi Sawankar

Address Gausikrupa Nagar Wadgaon

Date of Admission 15/06/23 Date of Discharge 19/06/23

Particulars of Treatment	Charges	Days	Total
Consultation / Admission Fee	1500	4	6000.00
✓ Room charges	800	4	2200.00
✓ Doctor Visit fee	600	4	2400.00
✓ Nursing charges			
Delivery charges			
Induction charges			
✓ Operation chrges			18000.00
Anaesthesia charges			
Assistant Doctor fee			
Assistant Staff fee			
✓ Operation Theatre charges			6000.00
Monitoring charges			
Blood Transfusion charges			
.....			
.....			
Total			35600.00

Thanks

Received Amount

thousand

Thirty five
six hundred only

DR. GIRISH RAMRAO MA
Signature M.B.B.S., D.G.O., F.I.C.O.G.
MBA (Hosp & Healthcare Manager)