

V.O.CHIDAMBARANAR PORT TRUST

MEDICAL DEPARTMENT

Remuneration and conveyance expenses bill in connection with the visit to VOC Port Trust Hospital / Dispensary as per Medical Department's order No.H-08/02/2011 - 2012/ D.990, dated: 18.06.2012.

1. Name of Part-time Doctor and Spedcialisation :
2. Month and year of claim
3. **Rate of Remuneration for Regular Visit** :
 - (a) Super Specialist : Rs. 600/- per visit
 - (b) Specialist : Rs. 500/- per visit
4. **Anethesia with M.D. Qualification**
 - (a) General : Rs. 800/- per Surgery
 - (b) Spinal : Rs. 750/- per Surgery
 - (c) TIVA : Rs. 500/- per Surgery
 - (d) Regional Nerve block :Rs. 500/- per Surgery
 - (e) Local Infiltration : Rs. 400/-per Surgery

Rates of Regular Visit to Port Hospital

Rs.

Dates of Regular Visit to Port Dispensary

Rs.

4. Dates and Time of emergency visit / Pre operative / Post operative visits Rs. 400/- per visit

Emergency Visit														
Pre Operative Visit														
Post Operative Visit														

5. Rate of Additional amount for Surgery

- (a) Major Operation : Rs. 3500/- per surgery (b) Minor Operation : Rs. 1500/- per surgery
- (c) Very Minor Surgery : Rs.1000/- per surgery

Dates of Operation (Name of surgery/Anethesia may please be indicated)

6. Rate of conveyance expenses

- (a) No. of visit to Port Hospital Rs. 250 per visit x = Rs.
- (b) No. of visit to Port Dispensary Rs. 125 per visit x = Rs.

Total amount = Rs. -----

STAMPED RECEIPT

_Received a sum of Rs. (Rupees
Only) towards Remuneration and Conveyance expenses for the
Month of from the Financial Adviser & Chief Accounts Officer, V.O.C Port Trust, Tuticorin -4.

SIGNATURE

To
The Chief Medical Officer, VOC Port Trust

CERTIFICATE

Certified that the dates mentioned by the Visiting Specialists are correct.

SIGNATURE OF SR. NURSE