

Deskripsi	Jumlah	Harga
21-Aug-25 PYREXIN 1G / 100 ML INFUS	1	87,700.00
21-Aug-25 CEFTRIAXONE SODIUM 1 G INJ	3	50,400.00
21-Aug-25 SPUIT 10 CC	3	12,600.00
21-Aug-25 OMEPRAZOLE 40 MG INJ	2	152,600.00
21-Aug-25 SPUIT 5 CC	3	9,600.00
22-Aug-25 ZINC SULFAT SYRUP 20 MG / 5 ML	1	12,963.00
22-Aug-25 D5 1/4 NS 500 ML INFUS	2	63,800.00
22-Aug-25 OMEPRAZOLE 40 MG INJ	1	76,300.00
22-Aug-25 SPUIT 10 CC	3	12,600.00
22-Aug-25 SPUIT 5 CC	3	9,600.00
22-Aug-25 CEFTRIAXONE SODIUM 1 G INJ	3	50,400.00
22-Aug-25 OMEPRAZOLE 40 MG INJ	1	76,250.00
22-Aug-25 WI 500 ML (AQUA PRO INJECTION)	10	760.00
23-Aug-25 OMEPRAZOLE 40 MG INJ	1	76,250.00
23-Aug-25 CEFTRIAXONE SODIUM 1 G INJ	1	16,775.00
23-Aug-25 D5 100 ML INFUS	1	28,594.00
23-Aug-25 WI 500 ML (AQUA PRO INJECTION)	10	760.00
23-Aug-25 WI 500 ML (AQUA PRO INJECTION)	30	2,280.00
23-Aug-25 NAACL 100 ML INFUS	1	27,984.00
23-Aug-25 CEFTRIAXONE SODIUM 1 G INJ	3	50,400.00
23-Aug-25 PANTOPRAZOL 40 MG INJ	2	183,000.00
23-Aug-25 SPUIT 5 CC	3	9,600.00
23-Aug-25 D5 1/4 NS 500 ML INFUS	2	63,800.00
23-Aug-25 SPUIT 10 CC	3	12,600.00
23-Aug-25 PARACETAMOL 1 G / 100 ML INFUS	1	64,900.00
24-Aug-25 PANTOPRAZOL 40 MG INJ	-1	-91,500.00
24-Aug-25 CEFTRIAXONE SODIUM 1 G INJ	-2	-33,550.00
24-Aug-25 AZITROMYCIN SYRUF	1	68,625.00

2,496,036.00



RSU ABDUL RADJAK PURWAKARTA

CLAIM NOTE

MR ID	: 622282	Class	: KLS II
Case ID	: 2397354	Room #	: AMETHYST 0
Patient Name	BRIANTHA CIPTA UTOMO, AN		
Company Name	SUMI RUBBER INDONESIA, PT (DUNLOP)		
Treatment Date:	20-Aug-2025 To 24-Aug-2025		

Category	Activity Count	Total
AMETHYST		
KLS I AMETHYST 1.1	5 x	321,000
MATERAI	1 x	10,000
VISITE DOKTER SPESIALIS (Paramita Diah Winarni	4 x	136,000
VISITE DOKTER UMUM (Fithriyanti, dr)	1 x	61,000
VISITE DOKTER UMUM (Nisa Uzlifatul Jannah, dr	2 x	61,000
VISITE DOKTER UMUM (Silmi Zhillan Nur Rahman,	1 x	61,000
		2,403,000.00
PHARMACY APOTIK		2,530,224.00
PHARMACY DEPO		441,926.00
LABORATORY		326,000.00
RADIOLOGY		201,000.00
UGD		112,000.00
ADMINISTRATION IP		300,707.00
JASA PELAYANAN		401,250.00
Total Charge :		6,716,107.00

PAYMENT

Case ID2397354

MR ID622282

Patient NameBRIANTHA C

CategoryIP

Intake Date08/20/2025

Closed Date08/24/2025

Company NameSUMI RUBBER INDONESIA, PT (DU

No SEP

Statement

Will you print as detail ?

OK

Cancel

0

6,716,107.

6,716,107.

CLOSED

Create Payment

Create MaVa

Not Cover Company

Print Claim Note

Print Statement

Claim Note No Document

Close

Total Treatment		Total Payment			
Category	Total Treatment	Paym	Invoice ID	Type	Total
ADMINISTRATION	701,957.				
AMETHYST	2,403,000.				
LABORATORY	326,000.				
PHARMACY APOTIK	2,530,224.				
PHARMACY DEPO	441,926.				
RADIOLOGY	201,000.				
UGD	112,000.				