

SOUTH COTABATO PROVINCIAL HOSPITAL
Aguinaldo St., City Of Koronadal, South Cotabato

STATEMENT OF ACCOUNT

FINAL BILL

SOA Reference No : 2023-000036270

NUMBER OF DAYS : 5

NAME : MANDID, ROMEO MALLORCA

AGE : 64 y/o

ADDRESS : PRK. STA.CRUZ, CANNERY SITE, POLOMOLOK,
SOUTH COTABATO

HOSPITAL NO : 72-00-02

DATE/TIME ADMITTED : 06/21/2023 07:25:00 PM

WARD/ROOM : MALEWARD 2NDFLR/ROOM 2
BED : BED03

DATE/TIME DISCHARGED: 06/26/2023 9:07 AM

PHIC : SSS Pensioner - Member

ATTENDING PHYSICIAN : GUAY, JERGEE MARI S.

MEMBERSHIP 170500236623 - MANDID, ROMEO

ADMITTING DIAGNOSIS : SEPSIS SECONDARY TO CELLULITIS RIGHT FOOT, DM II UNCONTROLLED, HYPERTENSION II CONTROLLED

PACKAGE DESCRIPTION : Cellulitis of other parts of limb, Axilla; Cellulitis of Hip; Cellulitis of Shoulder :

HOSPITAL CHARGES

PARTICULARS	ACTUAL CHARGES	AMOUNT OF DISCOUNTS		PHILHEALTH BENEFITS		Out of Packet of Patient	BALANCE
		PWD/SENIOR DISCOUNT	PCS/DSD/HAP/HMO/OTHERS	First Case Rate Amount	Second Case Rate Amount		
Drugs and Medicines	1,505.35	301.07		0.00			0.00
Laboratory Examination	4,665.00	933.00		0.00			0.00
Mahintana (Drugs and Medicine)	1,042.60	208.52		0.00			0.00
Miscellaneous	535.00	107.00		0.00			0.00
Non Drugs	327.80	65.56		0.00			0.00
PHIC Package	0.00	0.00		6,720.00	0.00		0.00
Room and Board	2,500.00	500.00		0.00			0.00
Xray Fee	600.00	120.00		0.00			0.00
TOTAL	11,175.75	2,235.15	0.00	6,720.00	0.00	0.00	2,220.60

PROFESSIONAL FEES

PARTICULARS	ACTUAL CHARGES	AMOUNT OF DISCOUNTS		PHILHEALTH BENEFITS		Out of Packet of Patient	BALANCE
		PWD/SENIOR CITIZEN DISCOUNT	PCS/DSD/HAP/HMO/OTHERS	First Case Rate Amount	Second Case Rate Amount		
PF - GUAY, JERGEE MARI S.		.00	.00	.00	.00	.00	.00
TOTAL	2,880.00			2,880.00		.00	.00

SUMMARY OF PHIC CHARGES

PARTICULARS	ACTUAL CHARGES	TOTAL DISCOUNTS		PHILHEALTH		BALANCE
		PWD/SENIOR	PCS/OMAP	FIRST CASE	SECOND	
Hospital Charges	11,175.75	2,235.15	0.00	6,720.00		2,220.60
Professional Fees	2,880.00	576.00	0.00	2,880.00		(576.00) H
TOTAL	14,055.75	2,811.15	0.00	9,600.00	0.00	1,644.60 NBB

CERTIFIED CORRECT BY:

BILLANO, STEFANIE NEIL C.

Billing Clerk

(083) 228-3206 local 108

PRINTED: 06/26/2023 09:07 AM

Signature:

Name of Representative:

Relationship to Member:

Contact Number:

Address:

Stefanie

Stefanie

husband

09513733739

Sta. Cruz cannery file Pol. So. Cot.

Fund Source/Discounts	Amount
MAIP	<i>P 1,079.00</i>
SCPH	<i>P 444.60</i>
Total:	<i>P 1,523.60</i>

APPROVED TO CHARGE
TO DOH-MAN

CONRADO M. BRAÑA
Chief of Hospital

ad
ANABELL B. PIÑON, RSW
Lic. No. 0036674



Republic of the Philippines
Province of South Cotabato
SOUTH COTABATO PROVINCIAL HOSPITAL
City of Koronadal, South cotabato
Tel. # (083) 228-3206 Fax # (083) 228-3506
"PhilHealth Accredited"

MEDICAL CERTIFICATE

This is to certify that _____ **ROMEO MALLORCA MANDID** _____ **64** _____ old,
residing at _____ **PRK. STA. CRUZ CANNERY SITE POLOMOLOK SOUTH COTABATO** _____
was _____ **Admitted** _____ in this hospital on _____ **June 21, 2023** _____
to _____ **June 26, 2023** _____

DIAGNOSIS:

- HYPOGLYCEMIC CRISIS SECONDARY TO DIABETES MELLITUS TYPE II UNCONTROLLED;
- CELLULITIS RIGHT FOOT
- HYPERTENSION STAGE II

X-X-X-X-X-X-X-X-X-X-X-X-X-X-X-X

This certification if being issued to	Romeo M. Mandid
for whatever purpose it may serve him/ her best.	

Given this 27th day of June, 2023 at South Cotabato Provincial Hospital

City of Koronadal.


JERGEE MARI S. GUAY, MD
Medical Officer IV
Lic. #: MD0146154

Note: Not valid for Medico Legal

I--