

## **RFH Ruiru**

ALONG EASTERN BYPASS AT KARUGURU STAGE

NAIROBI, KENYA Tel: +254 123 456 789

Email: info@rfhhealthcare.co.ke Website: www.rfhhealthcare.co.ke

Name: TIMOTHY GATHURA BORO

**Reg No:** RFH-80601-24

**OP Visit Date.** 2024-10-16 12:33:00

**OP Visit No.** OPV-166898-8

Account: BARKER & BARTON KENYA

**A/c No:** 01-2345-67

Insurance Co: JUBILEE INSURANCE

Membership No: 1234567

**Doctor:** LENNOX YAA - GENERAL PRACTICE

Claim Number: 1234567 - WYX42WVGMY

Invoice No: OP-95747-24-8 Invoice Date: 16/10/2024 **Consultation Amount:** 1000.00 **Pharmacy Amount:** 1100.00 1200.00 **Lab Amount: Radiology Amount:** 0.00 **Referral Amount:** 0.00 **Service Amount:** 0.00

## **Diagnosis**

ICD Code ICD Name

Impression

**Final Diagnosis** 

J20 Acute bronchitis
J03 Acute tonsillitis

## **DETAILED INVOICE**

| BILL DATE<br>Consultation | REF No.      | DESCRIPTION          | QTY  | RATE(KES)                     | AMOUNT(KES)          |
|---------------------------|--------------|----------------------|------|-------------------------------|----------------------|
| 2024-10-16                | OPV-166989-8 | GENERAL PRACTITIONER | 1.00 | 1,000.00<br><b>Sub Total:</b> | 1,000.00<br>1,000.00 |
| Pharmacy                  |              |                      |      |                               | ,                    |
| 2024-10-16                | PRDIN00011   | ZULU SP TABS         | 10   | 59.00                         | 590.00               |
| 2024-10-16                | PRDIN02122   | MONTIZED-L           | 10   | 51.00                         | 510.00               |
|                           |              |                      |      | Sub Total:                    | 1,100.00             |
| Laboratory                |              |                      |      |                               |                      |
| 2024-10-16                | L000448      | HAEMOGRAM            | 1.00 | 1,200.00                      | 1,200.00             |
|                           |              |                      |      | Sub Total:                    | 1,200.00             |

## KES

Three Thousand Three Hundred - Zero Cents Only

Total Amount(KES): 3,300.00
Total Copay(KES): 0.00
Amount Payable(KES): 3,300.00

137306 {QR\_CODE}

Served By: EVERLYN AWUOR Patient's Signature:

16/10/2024 3:44