

### VISIT HISTORY

Patient Name	: ARYANSHI DAS	Date	: 19-Apr-2025
Gender/Age	: 1 Year, 4 Months/Female	Consultant	: Dr. LEENATHA REDDY
UHID	: KHB807498	Department	: PAEDIATRICS

#### Clinical Assessment

Date : 19-Apr-2025

#### CLINICAL ASSESSMENT - PAED

**CHIEF COMPLAINTS :** CAME FOR REGULAR CHECKUP

CHILD IS ACTIVE & PLAYFUL

NO C/O COUGH,COLD & FEVER

**DETAILED CLINICAL ASSESSMENT :** CAME FOR VACCINATION

**BIRTH HISTORY :** -

**GROWTH AND DEVELOPMENTAL HISTORY :** IS APPT TO GA

**PAST MEDICATION HISTORY :** -

**IMMUNIZATION HISTORY :** IS UP TO DATE

**General & Systemic Examination :** O/E:

AFEVRILE

VITALS STABLE

S/E:

RS,CVS,P/A-NAD

Normal

**DIAGNOSIS :** VACCINATION

**TREATMENT PLAN :** FOLLOW THE PRESCRIPTION

INJ.TRESIVAC-1

INJ.PNEUBIVAX -14

**FOLLOW UP ADVICE :** CALPOL DROPS-100MG/ML- 1.4ML - (TEMP>100F)/SOS/6TH HRLY

REVIEW SOS

DANGER SIGNS EXPLAINED

\* REVIEW DATE : 19-May-2025

#### Vitals

Date : 19-Apr-2025 00:00

Name

Temperature Location

Value

forehead

Temperature (°F)

97.8

Weight in (Kg)

9.3

Height / Length in (Cm)

77

BMI (Kg/m<sup>2</sup>)

15.18

  
Value  
at head

Dr. LEENATHA REDDY

PAEDIATRICS

Reg No. : ANP 2013 0000428 KTK

## REGISTRATION / CONSULTATION BILL

UHID : KHB807498  
 PATIENT NAME : Baby ARYANSHI DAS  
 AGE : 1 Y 4 M 13 D  
 SPONSOR : KINDER BANGALORE

VISIT DATE : 19-04-2025  
 BILL NUMBER : REG/2526/01066  
 BILL DATE : 19-04-2025 11:31:17  
 SCHEME : KINDER BLR

SL No	PARTICULARS	SPECIALITY	AMOUNT
1	SUBVISIT CHARGE LEENATHA (Room No : 4 Screening Room : ) (Token No : W1)	PAEDIATRICS	700.00
		NET AMOUNT	700.00
		PAID AMOUNT	700.00
		AMOUNT TO PAY	0.00

UPI

SEVEN HUNDRED RUPEES ONLY

CREATED DATE : 19-Apr-2025 CREATED BY : 122

CREATED AT : FRONT OFFICE

## Pharmacy Bill

DL NO : KA-B61-220611

PATIENT NAME :	BABY ARYANSHI DAS	BILL NO.	PHOP/2526/00772
UHID :	KHB807498	BILL DATE	19-04-2025 11:42:56
GENDER / AGE :	FEMALE / 1Y-4M-13D	DOCTOR	DR. LEENATHA REDDY
SPONSOR :	KINDER BANGALORE	PAYMENT TYPE	Cash/Card
SCHEME :	KINDER BLR		
LOCATION :	OPD PHARMACY		

#	MFG CODE	BATCH NO	PARTICULARS	HSN CODE	QTY	EXPDT	GST	RATE	AMOUNT	No.OF DAYS	DOSAGE	INSTRN
1		447332110M	HANSAPLAST ROUND	30051090	2.00	01-10-27	12.00	1.79	4.00	0 x - Day(s)		
2		223600124A	PNEUBEVAX-14 VACCINE INJ	30024129	1.00	30-07-26	5.00	3300.00	3465.00	0 x - Day(s)		
3		G24L020779	ALCOHOL SWABS	90189011	2.00	01-11-29	12.00	2.46	5.52	0 x - Day(s)		
4		0134F009	TRESIVAC PFS	30022016	1.00	30-12-26	5.00	628.57	660.00	0 x - Day(s)		

CGST : 98.73	SGST : 98.73	NET AMOUNT :	4134.52
		AMOUNT TO PAY :	4135.00
		PAID AMOUNT :	4,135.00

UPI

FOUR THOUSAND ONE HUNDRED THIRTY-FIVE RUPEES ONLY

Medicine return /Refund will subject to the below mentioned terms and conditions :

- 1.Customer need to produce the original bill.
- 2.Medicines requiring refrigeration will not be refunded.
- 3.Refund is permitted only within 15 days of bill date (provided with a valid expiry date).
- 4.Damaged medicines and cut strips/opened bottles will not be refunded.