



: OIV2309070414

: 07-Sep-2023 19:55

: 07-Sep-2023 17:12

Siloam Hospitals Lippo Cikarang Jl. M. H. Thamrin Kav. 105, Lippo Cikarang - Bekasi 17550 Telp. +62 21 2963 6900, 2693 6999 Fax. +62 21 2963 6969

## INVOICE



Registration No / MR : OPA2309070467 / 10-01-96-51

: SARAH UMMU LATHIFAH

Address : MAWAR RAYA NO 2 LEMBAH HIJAU LIPPO CIKARANG

Patient Type : PRIVATE

Name

**Primary Doctor** : dr. Widhi Usansi, SpP, FISR

No	Name	Description	Qty	UOM	Amount	Disc.	Patient
	CONSULTATION AND VISIT						
1	OPD CONSULTATION I_1	dr. Widhi Usansi, SpP, FISR	1		170.000	0	170.000
	DRUGS	•	VALUE OF THE PARTY				
2	CODEIN 15MG TAB	PHARMACY OUTPATIENT	7	TAB	13.530	0	13.530
3	METHYLPREDNISOLONE 16MG TAB	PHARMACY OUTPATIENT	10	TAB	19.426	0	19.426
4	SANADRYL EXP. 60ML SYR	PHARMACY OUTPATIENT	2	FLS	39.111	0	39.111
5	ZYCIN 500MG TAB	PHARMACY OUTPATIENT	3	TAB	238.262	0	238.262
6	INTRIZIN 10MG TAB	PHARMACY OUTPATIENT	14	TAB	179.487	0 -	179.487
7	INTERPEC 30MG TAB	PHARMACY OUTPATIENT	14	TAB	42.634	0	42.634
				TOTAL .	700.440	^	700 440

SUB TOTAL: 702.449 702.449 45.000

ADMIN CHARGE:

Invoice No

Invoice Date

Registration Date

ROUNDING: 51

TOTAL: PAYMENT: 747.500 747.500

BALANCE:

0

IN WORDS PATIENT:

Tujuh ratus empat puluh tujuh ribu lima ratus rupiah

## PATIENT RECEIPT / KUITANSI:

Type	Date	Payment Mode	Account No	Account Name	Description	Cashier	Patient
Payment	07/09/23	Credit Card	XXXXXXXXXXXXXXX209	-	CIMB NIAGA, Ref No: 002335	Irma Nurul	747.500

TOTAL: 747.500

CASHIER



