



RAMIRO COMMUNITY HOSPITAL

0139 C. Gallares Street, Poblacion II Tagbilaran City, Bohol, Philippines
Tel. No(s): 6338-4113515

Detailed Patient Statement of Account

Run Datetime: 8/11/2023 10:58:23 AM

Patient Name: **NAYRE, MARIA LILANI CONEJERO**
Hospitalization Plan: **PhilHealth**
Attending Doctor(s): **DR. JOAR KENT PELIGRINO GUMAPON**
Patient Address: **New Lourdes, Cortes, Bohol, Philippines 6301**

Admission No: **51960**
Age: **63Y0M17D**
Admission Date: **08/12/2023**
Discharge: **08/13/2023 3:03:00 PM**
Room No.: **RM 315-1**

	Date	Description	QTY	Unit Price	Amount
ROOMS					
	5/24/2023	RM 315 – 1	1.00	2,200.00	2,200.00
	5/25/2023	RM 315 – 1	1.00	2,200.00	2,200.00
	5/25/2023	RM 315 – 1	1.00	2,200.00	2,200.00
	5/25/2023	RM 315 – 1	-1.00	2,200.00	-2,200.00
		Total			4,400.00
Emergency Room & E-Cart					
	5/24/2023	3-WAY STOPCOCK	1.00	135.00	135.00
		ALCOHOL PREP PAD	3.00	7.00	21.00
		COTTON BALLS 5S	1.00	40.00	40.00
		GLOVES-SINGLE M (NONSTERILE)	6.00	15.00	90.00
		IV CATH G18	1.00	195.00	195.00
		IV DRESSING TRANSPARENT SIZE 7X9	1.00	195.00	195.00
		IV SPLINT ADULT, SMALL (PINK)	1.00	100.00	100.00
		MACROSET	1.00	150.00	150.00
		NORMAL SALINE 1 LITER (E)	1.00	125.00	125.00
		O2 SAT DETERMINATION	1.00	100.00	100.00
		PLASTER (MICROPORE) 1 INCH	1.00	131.00	131.00
		PLASTER LEUKOPLAST 1.25CM/ 12 INCHES	1.00	25.00	25.00
		Total			1,307.00
Central Supply Room					
	5/24/2023	BLOOD ADMINISTRATION SET	2.00	250.00	500.00
		Total			500.00
	5/25/2023	GLOVES-SINGLE M (NONSTERILE)	20.00	15.00	300.00
		Total			300.00
Admitting					
	5/24/2023	ADMISSION KIT	1.00	1,000.00	1,000.00
	5/24/2023	DISINFECTION FEE	1.00	750.00	750.00
		Total			1,750.00
Floor III North Nursing Unit & E-Cart					
	5/25/2023	O2 SAT DETERMINATION	1.00	100.00	100.00
		SURG BOUFFANT CAP DISP	2.00	10.00	20.00
		Total			120.00



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	Date	Description	QTY	Unit Price	Amount
Laboratory	5/24/2023	COVID ANTIGEN	1.00	660.00	660.00
		DONOR SCREENING (PACK RBC)	1.00	1,500.00	1,500.00
		LAB SURCHARGE (STORAGE FEE-BLOOD BANK)	1.00	50.00	50.00
		X-MATCHING, PER UNIT	1.00	481.00	481.00
		Total			2,691.00
Pharmacy	5/24/2023	ALNIX 10MG TAB	1.00	56.25	56.25
		BIOGESIC 500MG TAB	2.00	8.00	16.00
		Total			72.25

LABESORES, MARIAN CACAYAN

Billing Clerk