



OLJABET HOSPITAL

INVOICE

INV 17208

PATIENT PAULINE WAIRIMU IPNO 17208 M/N 488754

DOA 28/04/2023

DOD...08/05/2023

ITEMS	QTY	@ PER	SUB TOTALS	TOTALS
ADMISSION FEE	1	1000	1000	1000
<u>DRUGS</u>				
IV CEFTRIAZONE 1GM BD	10	520	5200	
IV FLAGYL 500MG TDS	15	350	5250	
IV PCM 1 GM TDS	15	200	3000	
IM TRAMADOL 100MG BD	6	450	2700	
IV PLASIL 10 MG TDS	15	300	4500	
SYR LACTULOSE	1	400	400	
SYR RANFERON 10 MLS TDS	1	450	450	
TRANSFUSION I PINT	1	2000	2000	
FLOXAPEN 500MG QID	20	30	600	
OMEPRAZOLE 20 MG BD	10	55	550	
MELOXICAM 7.5MG BD	10	30	300	24950
<u>WARD</u>				
DOCTORS FEE	10	5000	50000	
NURSING FEE	10	4000	40000	
BED CHARGES	10	3000	30000	
THEATRE FEE	1	35000	35000	
SURGEON FEE	1	30000	30000	
ANAESTHETIST FEE	1	10000	10000	195000
<u>LABS</u>				
FHG	1	1500	1500	
UECS	1	2500	2500	4000
<u>NON-PHARMACEUTICALS</u>				
SYRINGES	20	15	300	
NEEDLES	20	10	200	
LATEX GLOVES	10	20	100	
GIVING SET	1	200	200	800
			TOTALS	225750
			LESS NHIF	10000
			FINAL BILL	215750