

No. SEP

SURAT ELEGIBILITAS PESERTA RSUD KRATON Pekalongan

Nama Peserta : LUSIANA DEWI

Tanggal Lahir : 1997-11-01

Alamat Pasien : KLUNJUKAN Kel. Klujukan Kec. Sragi

Kab.Pekalongan Prov.Jawa Tengah

16.

Jns Kei

Tanggal SEP : 2020-06-22 No. RM : 498473 No. Registrasi : 0222062000

.022206200002

1105R0010620V002414

No. Kartu : 0000 Poli Tuluan :

Asal Faskes Tk. I : Sragi I

Antrian :-

Diagnosa Awai : Fever, unspecified

Diagnosa Utama

Peserta

COB :0

Jenis Rawat : Rawa Kis Tanggungan : Kelas

Catatan

Daniani

: PEGAWAI SWASTA

: Rawat Inap

: Kelas 3

: R SERUNI

Penjamin :

Tindakan/ Operasi

Pasien/ Keluarga Pasien Dokter

Saya Menyetujui BPUS Kese ratan menggunaran intermasi Medis Pasien jika dipertukan

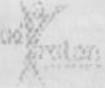
*SEP tuskun nobagai luikti panjamin pasarta

Dicatak Ofeh : Anggora



RSUD KRATON KAB. PEKALONGAN, SCHOOL WILL WORLD NO. 31 Telp. (0295) 421621 - 423523 Fax. 423225

Email roudkraton@vahoo.co.id



NO RM Nama

498473 LUSIANA .

SYARIEFAH DEWI

Tanggal Lahir

20-11-1997

(Moden din man (empalkan mikar jika ada).

Jenis Kelamin Perempuan.

RINGKASAN PASIEN PULANG

NO Reg

Carabayar

Dirawat

22-06-2020 5/1 03-07-2020

Lama Dirawat

12

Rusing Rawat

Kesdash Kehisr

Cara Kehuar

S.III.C.7

Membaik

Distrikan Pulang

DPIP (Dokter Penanggung Jawah Pelayanan)

Tim Dekter

dr Afiyah Sp. PD

dr. L. Lolly Pattiselanno, Sp. P.

ALERGI

INDIKASI RAWAT

demam, sesak nafas, nyeri telan

DEMERIKS A AN FISIK TD 91/141, NADI 141, SUHU 40, PERNAFASAN 28

OS DEMAM I MINGGU, SESKA NAFAS, NYERI TELAN, BATUK, OS PULANG DARI DIRANG.

3 MINGGU YLL

PHED (2)

PEMERIRSAAN

PENUNJANG

HB 364, NEUTROFIL 78.8, LIMPOSIT 13.2, BOSINGFIT 0.7, SGOT 60.4, SGFT 42.1, CRP 24.0

WIDAL TYPHI O DAN H 1/320, PARATYPHI AH 1/160 THORAK AP-DD. TB PARU, OTHER INFECTION

TCM TIDAK DI TEMUKAN THORAK KE 2= TB PARU LUAS SARS COV NEGATIF

Kode ICD 10

AGNOSIS MASUK

Fever, unspecified

KOMORBIDITAS

Observation for other suspectedd issues and conditions

TUBERCULOSIS OF LUNG, CONFIRMED BY SPUTUM MICROSCOPY WITH A150 A17

Typhoid fiver

TINDAKAN/OFERASI YANG

SUDAH DILAKUKAN

Microscopic examination of blood other microscopic examination

other chest at-nev

87.49

439/

KONDISI PASIEN PULANG

Kesdam Umum

Tekanan Darah

MEMBAIK

90/60

mmHg

Pernatasan

22

x/menit

88)

m/menit

36

OC.

Dicetak Oleh Sri Yanti

RM 52.1



RSUD KRATON KAB. PEKARONGAN

et au No. 31 Telp. (0285) 421621 - 423523 Fax. 423225

Email: raudkraton@wahoo.co.id



NO RM

498473 · A

SYARIEFAH DEWI

Tanggal Lahir : Jenis Kelamin :

20-11-1997 Perempuen

(Modeus din stru tampalkan stikartika sela)

RINGKASAN PASIEN PULANG

OBAT YANG DIBAWA PULANG

NO	NAMA OBAT	JML	ATURAN PAKAI	KETERANGAN
1 2	Cefizirne 200rng Sucralfat syr	10,00	2 x 1 3 x 1	Setelah Makan Setelah Makan
71.4	Curcuma tab	10,00	2 x 1	Setelah Makan

OBAT SELAMA DIRAWAT

Aqua 1 liter unicap(1 BOTOL), Aqua inj 25ml ctsu(7 BOTOL), Codein 10mg(36 TABLET), Cover All (Donasi)(1 PCS), Ermuno tab(12 TABLET), Ethambutol 500mg tab(6 TABLET), Fatrolit inf(10 BOTOL), Isoniazid 100mg (INH 100mg)(9 TABLET), Masker Visce(6 PCS)

Merimac 450mg cap(3 CAPSUL), Meropenem 1gr inj(16 AMP), Metamizole Sod 500 inj(14 AMP), Montfloxacin 400mg 250ml(3 BOTOL), N-ACE 100mg/ml inj(1 AMP), Naci 100ml PiggyBack(1 BOTOL), Naci 50govers with (1 BOTOL), Omeprazole 40mg in/22 AMD.

Ondancentron 4mg inj(33 AMP), Paracetamol inf(8 BOTOL), Pirazinamide 500mg tab(6 TABLET), Resfar 200mg/ml inj(6 VIAL), Sanfuliq tab(12 TABLET)

PERAWATAN SELANJUTNYA

Keteringan

Kontrol di RSUD Kraton E

Rujuk atau Rujuk Balik di Luar RSUD Kraton.

Klinik

Spesialis Pani-pani

Dolder dr. L. Lolly Pattiselanno, Sp. P.

Tengesi

08-07-2020

Jadwal Dokter Selasa, Jumat, Rabu

EDUKASI PASIEN : KONTROL UEBAG SESUAI JADWAL

"Bila Terjadi hal-hal dibawah ini sebelum waktu kontrol segara hubungi sarana kesehatan terdekat atau IGD RSUD KRATON Kab. Pekalongan"

Pasien / Keluarga

Hunf

lica Starifal

Pekalongan, 03 Juli 2020

Dokter Penangguay Jawab Pelayanan

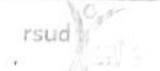
dr. L.Lolfy Pattiselanno, Sp.P.

4396.



RSUD KRATON KAB.PEKALONGAN

Jl. Veteran No. 31 Telp. (0285) 421621 - 423523 Fax. 423225 Pekalongan 51116 Email: rsudkraton@yahoo.co.id



SURAT PERINTAH OPNAME

024519/SPO/IGD/0620

No. RM

498473

Nama Klinik

Instalasi Gawat Darura

No Reg

032206200004

No Rujukan

Nama Pasien

LUSIANA SYARIEFAH DEWI

Tanngal Rujukan

22-06-2020

Tanggal Rujukan

22-06-2020

Berlaku Sampai

21-07-2020

Diagnosa

R50.9 - Fever, unspecified

Terapi

Rencana tindak lanjut yang akan dilakukan pada kunjungan selanjutnya

perbaikan K U

Rujuk ke Klinik

Tanggal Obat Habis

Pekalongan 22-06-2020



dr.Ferra Tresnadewi, M Kes.

Jl. Veteran No. 31 Telp. (0285) 421621 - 423523

Fax. 423225 Pekalongan 51116 Email: rsudkraton@yahoo.co.id

EXPERTISE RADIOLOGI

No. RM 498473

LUSIANA SYARIEFAH DEWI

Dokter Perajuk

Alamat Pasien

dr.L.Lolly Pattiselanno, Sp.P.

KLUNJUKAN RT.003 RW.001 Des.Klujukan Kec.Sragi

ısuu

raton

Kab.Pekalongan Prov.Jawa Tengah

Ruang/Klinik : Ruang Seruni

Nama

Tanggal Lahir: 20-11-1997

Kel: PEREMPUAI

THORAX AP

Jenis Pemeriksaan Waktu Pemeriksaan

: 02-07-2020 11:10:19

√Naktu Expertise

: 02-07-2020 11:25:18

Hasil Pemeriksaan

TS YTH:

DIBANDINGKAN FOTO TGL 29/6/2020 SAAT INI:

VASKULER PULMO MASIH MENINGKAT RETICULAR OPACITY MASIH SAMA

EFFUSI PLEURA SUDAH TAK TERLIHAT

Kesan PERBAIKAN

Pekalongan,02 Juli 2020

dr.Malite Budhiwan, Sp.Rad

19650812 200903 2 001

Page 1 of 1



RSUD KRATON KAB.PEKALONGAN

Jl. Veteran No. 31 Telp. (0285) 421621 - 423523

Fax. 423225 Pekalongan 51116 Email: rsudkraton@yahoo.co.id

rsud raton

EXPERTISE RADIOLOGI dr.L.Lolly Pattiselanno, Sp.P. Dokter Perujuk

498473 No. RM Nama

LUSIANA SYARIEFAH DEWI

Kel : PEREMPUAI

KLUNJUKAN RT.003 RW.001 Des.Klujukan Kec.Sragi Alamat Pasien

Kab.Pekalongan Prov.Jawa Tengah

Tanggal Lahir: Ruang/Klinik

20-11-1997 Ruang Seruni

Jenis Pemeriksaan

THORAX AP 24-06-2020 12:52:02

Waktu Pemeriksaan

Naktu Expertise

: 25-06-2020 07:34:49

Hasil Pemeriksaan

TS YTH:

COR CTR < 50 %, AORTA NORMAL, CONUS PULMONALIS NORMAL

PULMO VASKULER MENINGKAT

TAMPAK RETICULAR OPACITY DIKEDUA PARU SIMETRIS

SINUS KOSTOFRENIKUS KANAN KIRI LANCIP DIAFRAGMA NORMAL, TRAKHEA DITENGAH

COSTA/KLAVIKULA, SCAPULA TAMPAK NORMAL, SOFT TISSUE NORMAL

Kesan

TB PARU LUAS

KABUPATEN PEKALONGAN

Pekalongap,25 Jui 2020

dr.Malita Budhiwan, Sp.Rad



PEMERINTAH KABUPATEN PEKALONGAN RUMAH SAKIT UMUM DAERAH KRATON INSTALASI LABORATORIUM

Jl. Veteran No.31 Telp.(0285)423523,421621 Fax.(0285)-423225 PEKALONGAN

Dokter

L.Lolly Pattiselanno, dr. Sp. P

Pasien

Alamat

LUSIANA SYARIEFAH

No.Lab No.RM

20018499 498473

Tgl. Order: Info Klinik:

25-06-20 11:26

Bangsal/Poli

Ruang Seruni

Umur/Jenis Kelamin :

/ Perempuan

22 Th

Tanggal Lahir

20-11-1997

Tanggal Periksa

25-06-20 11:28

Tanggal Cetak

25-06-20 11:57

Halaman

1/1

PEMERIKSAAN		HASIL	SATUAN	NILAI RUJUKAN
HEMATOLOGI				
LED		6	mm/jam	2.0 - 30.0
Darah Rutin				
Hemoglobin	L	11.7	g/dl	13 16
Hematokrit	Ĺ	34.2	96	12 - 16
Lekosit	_	6.20	10^3/ul	37.0 - 47.0
Trombosit		180.000	/mm3	4.80 - 10.80
Eritrosit	L	4.16	juta/mm3	150.000 - 450.000
Index Eritrosit	_	1.20	Jodayiiiiii	4.20 - 5.40
MCV		82.20	um3	79.00 103.00
MCH		28.10	pg	78.00 - 102.00
MCHC		34.20	g/dl	25.00 - 35.00
Diff Count		5112.0	grai	31.00 - 37.00
Neutrofil		60.3	%	50.0 - 70.0
Limfosit	Ĺ	21.6	%	25.0 - 40.0
Monosit	н	15.5	96	2.0 - 8.0
Eosinofil		2.3	%	2.0 - 4.0
Basofil		0.3	%	0.0 - 1.0
Netrofil Limfosit Ratio		2.8	7.0	< 3.13

Pemeriksa: MUKHAYAROH

Kepala Shift,

Penanggung Jawab Laboratorium,

Otorisasi Oleh: ADHY NUGROHO

dr. Maria Abdul Kadir ,SpPK



RSUD KRATON KAB. PEKALONGAN

Jl. Veterán No. 31 Pekalongan Telp (0285) 421621-423523 Fax. (0285) 423225 Email: rsudkraton@yahoo.co.id

SKRINING COVID - 19

1 Nama : LUSIANA SYARIEFAH

* Tgl Lh : 20/11/1997

(mohon diisi atau tempelkan stiker jika ada)

Petunjuk Pengisian					
Berl tanda centang (V)	pada kolom yang ses	uai	40		
[anggal	. 20 0	. 0			
L IDENTITAS	: 22 Ju	2020			
Nama	· Tuescano	Syariefal	no.		
Tanggal Lahir	: 20 - (1 - (99	and the second s	(Jew)		
Umur	:				
Jenis Kelamin	: 🗆 Laki- iaki	The second second second			
Alamat			uan Stagi, peholo	orden.	
ekerjaan	to a super such			0	
Unit/ bagian					
Province and the second	:				
Demam (Subu > 38°C	YANG DIRASAKAN D	ALAM 14 HAR!	TERAKHIR		
Demam (Suhu ≥ 38°C Batuk	/ Kiwayat demam	: □ Ya	□Tidak	37 × 402	
Sakit Tenggorokan		: WYa	☐ Tidak		
Sesak Nafas		: VZYa	☐ Tidak		
(Respiratory Rate ≥ 30	C	· WYa	□ Tidak		
Pilek	x/ ment)				
		: 🗆 Ya	Tidak		
HASIL PEMERIKSAAN					
RR:	28 10 91/54	Saturasi	02: 933	HR 141.	a superior of the
RIWAYAT PAPARAN	With the second second				
Riwayat kontak erat de	engan ƙasus konfirma:	si COVID-19			
Memiliki riwayat konta	k dengan hewan pen	ular			
ika hewan penular su	dah teridentifikasi)				
Memiliki riwayat perji memiliki demam ≥ 38°0	alanan ke Epicentrum	n <i>Enderni</i> dan	: - Riway	at he bieng t	Ibulan young to
 Kontak erat adalah ses dalam radius 1 meter d 	eorang yang melakuka engan penderita)	in kontak fisik a	tau berada dalam r	ruangan atau berkunjung (bercakap- cakap
REKOMENDASI PETUGA	AS SKRINING				and an inter-
asien ke	:□ Rumah Sakit	☐ Pulang		ALL SE SE	- Spran -
Petug	as Skrining			Pasien	
	A			1 41511	
	to			1.	
(gto- on		-	Winter.	
CASI KESEHATAN			1	()	

Menjaga kebersihan tangan dan mencuci tangan 6 langkah sesuai dengan standar WHO Etika batuk dan bersin dengan cara menutup hidung dan mulut dengan tissue atau lengan baju Ketika memiliki gejala saluran nafas, gunakan masker dan melapor ke petugas kesehatan Hindari bepergian ke daerah Outbreak, hindari menyentuh hewan atau burung serta mengunjungi peternakan atau



RSUD KRATON KAB. PEKALONGAN

kteran No. 31 Telp. (0285) 421621 - 423523

Fax. 423225 Pekalongan 51116 Email: rsudkraton@yahoo.co.id

rsud

EXPERTISE RADIOLOGI

LUSIANA SYARIEFAH DEWI 498473 Dokter Perujuk Alamat Pasien dr. Ferra Tresnadewi, M.Kes

Kel : PEREMPUAI : KLUNJUKAN RT.003 RW.001 Des.Kiujukan Kec.Sragi Kab.Pekalongan Prov.Jawa Tengah

Ruang/Klinik Tanggal Lahir : 20-11-1997 : Instalasi Gawat Darurat

No. RM

Nama

Jenis Pemeriksaan

THORAX AP

Waktu Expertise Waktu Pemeriksaan : 22-06-2020 05:12:10

Hasil Pemeriksaan : 22-06-2020 09:49:05

HIA SI

COR CTR < 50 %, AORTA NORMAL, CONUS PULMONALIS NORMAL

PULMO VASKULER MENINGKAT TAMPAK RETICULAR OPACITY DIKEDUA PARU DIAFRAGMA NORMAL, TRAKHEA DITENGAH SINUS KOSTOFRENIKUS KANAN KIRI LANCIP

COSTA/KLAVIKULA, SCAPULA TAMPAK NORMAL, SOFT TISSUE NORMAL

DD/ TB PARU, OTHER INFECTION

Pekalongan, 22 Jul 2020

dr.Malita Budhiwan, Sp.Rad

Page 1 of 1

INSTALASI LABORATORIUM

Jl. Veteran No.31 Telp.(0285)423523,421621 Fax.(0285)-423225

PEKALONGAN

Dokter

L.Lolly Pattiselanno, dr. Sp. P

Pasien

LUSIANA SYARIEFAH

Alamat

No.Lab

20018782

No.RM Tgl. Order: Info Klinik:

498473

28-06-20 17:37

Bangsal/Poli

Umur/Jenis Kelamin

R. Anggrek

22 Th / Perempuan

Tanggal Lahir

20-11-1997

Tanggal Periksa

28-06-20 17:41

Tanggal Cetak

28-06-20 19:07

Halaman

1/1

PEMERIKSAAN

HASIL

SATUAN

NILAI RUJUKAN

SERO IMUNOLOGI

Dengue Ig G Dengue Ig M Negatif Negatif

Negatif

Negatif

Pemeriksa: NAIMAWATI

Otorisasi Oleh: RAKHATIAR

· Kepala Shift,

Penanggung Jawab Laboratorium,

dr. Maria Abdul Kadir ,SpPK

▼est Report

Patient ID:

3326106011970002 LUSIANA S

Sample ID:

20-3326049-1-0306

Test Type:

Specimen

Sample Type:

Assay Information

vssay.	Assay Version	Assay Type
pert MTB-RIF Assay G4	5	In Vitro Diagnostic

Test Result:

MTB NOT DETECTED

Analyte Result

Analyte Name	Analyte Result	Probe Check Result
Probe D	NEG	PASS
Probe C	NEG	PASS
Probe E	NEG	PASS
Probe B	NEG	PASS
SPC	PASS	PASS
Probe A	NEG	PASS
QC-1	NEG	PASS
QC-2	NEG	PASS

User:

RETNO SULISTYANINGRUM

Status:

Done

Start Time:

23/06/20 11:30:10

Expiration Date*:

31/10/21

End Time:

23/06/20 13:11:22

S/W Version:

4.7b

Instrument S/N:

810603

Cartridge S/N*:

724722383

Module S/N:

Alamat : Sokorejo RT 04 RW 02 Pekalongan Timur.

625652

Reagent Lot ID*:

25503

Module Name:

B4

Notes:

Ruang: Seruni

Dokter: dr. Laurenz Lolly P, Sp.P

RM: 498473 Reg Lab: 0576

For In Vitro Diagnostic Use Only.



Ferra Tresnadewi, dr. MKes

LUSIANA SYARIEFAH

o.Lab 20018157 No.RM 498473

Tgl. Order:

22-06-20 05:21

Info Klinik :

Bangsal/Poli

R. IGD

Umur/Jenis Kelamin

22 Th / Perempuan

Tanggal Lahir Tanggal Periksa

20-11-1997 22-06-20 05:24

Tanggal Cetak

22-06-20 06:36

Halaman

2/2

PEMERIKSAAN	HASIL	SATUAN	NILAI RUJUKAN
S. typhi O	1/320		Negatif
S. typhi H	1/320		Negatif
S. paratyphi AH	1/160		Negatif

lemeriksa: PANTINI, ANGGORO PRAS

Otorisasi Oleh: RAKHATIAR

Kepala Shift,

Penanggung Jawab Laboratorium,

dr. Maria Abdul Kadir ,SpPK

raton

INSTALASI LABORATORIUM

3l. Veteran No.31 Telp.(0285)423523,421621 Fax.(0285)-423225

PEKALONGAN

Dokter Pasien Ferra Tresnadewi, dr. MKes LUSIANA SYARIEFAH

Alamat

No.Lab

20018157

No.RM : 498473 Tgl. Order:

22-06-20 05:21

Info Klinik :

WIDAL

Bangsal/Poli

R. IGD

Umur/Jenis Kelamin :

22 Th / Perempuan

Tanggal Lahir

20-11-1997

Tanggal Periksa Tanggal Cetak

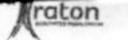
22-06-20 05:24

22-06-20 06:36

Halaman

1/2

	PEMERIKSAAN		HASIL	SATUAN	NILAI RUJUKAN
	HEMATOLOGI				
	LED		9	mm/jam	2.0 - 30.0
	Darah Rutin				
	Hemoglobin		12.7	g/dl	12 - 16
	Hematokrit	L	36.4	%	37.0 - 47.0
	Lekosit	_	6.74	10^3/ul	4.80 - 10.80
$\overline{}$	Trombosit		150.000		150.000 - 450.000
	Eritrosit		4.53	juta/mm3	4.20 - 5.40
	Index Eritrosit		11.00	Julia / Hillia	4.20 5.40
	MCV		80.40	um3	78.00 - 102.00
	MCH		28.00	pg	25.00 - 35.00
	MCHC		34.90	g/dl	31.00 - 37.00
	Diff Count		3 1130	24 cu	31.00 37.00
	Neutrofil	н	78.8	%	50.0 - 70.0
	Limfosit	L	13.2	%	25.0 - 40.0
	Monosit		7.0	%	2.0 - 8.0
	Eosinofil	L	0.7	%	2.0 - 4.0
	Basofil		0.3	%	0.0 - 1.0
	Netrofil Limfosit Ratio	н	6.0		< 3.13
	KIMIA KLINIK				
	Glukosa Sewaktu		92	mg/dl	70 - 140
	SGOT	н	60.4	U/L	< 31
	SGPT	Н	42.1	U/L	< 34
	Ureum		19.9	mg/dl	17-49
	GFR		123	mL/min/1.73m	>= 90
	Creatinin		0.70	mg/dl	0.60 - 1.00
	SERO IMUNOLOGI				
	CRP	н	24.0	mg/l	0.0 - 12.0
	MITTER				



INSTALASI LABORATORIUM Jl. Veteran No.31 Telp.(0285)423523,421621 Fax.(0285)-423225 PEKALONGAN * 17 V V

Dokter

Ferra Tresnadewi, dr. MKes

Pasien

LUSIANA SYARIEFAH

Alamat

No.Lab No.RM

20018159 498473

Tgl. Order:

22-06-20 05:29

Info Klinik:

Bangsal/Poli

Umur/Jenis Kelamin :

R. IGD

22 Th / Perempuan

Tanggal Lahir

20-11-1997

Tanggal Periksa

22-06-20 05:29

Tanggal Cetak

22-06-20 06:36

Halaman

1/1

PEMERIKSAAN

HASIL

SATUAN

NILAI RUJUKAN

SERO IMUNOLOGI

SARS-CoV-2 IgG & IgM

SARS-CoV-2 IgG SARS-CoV-2 IgM NEGATIF NEGATIF Negatif

Negatif

MFTDE: LATERAL FLOW

CATATAN: BILA HASIL PEMERIKSAAN RAPID TEST ANTIBODY

SARS-COVID-2 NEGATIF HARUS DILANJUTKAN PEMERIKSAAN

TEST ANTIBODY SARS-COVID-2 SETELAH 10 HARI.

Pemeriksa: ANGGORO PRASETYO

Otorisasi Oleh: RAKHATIAR

Kepala Shift,

Pantini

Penanggung Jawab Laboratorium,

dr. Maria Abdul Kadir ,SpPK



PEMERINTAH KABUPATEN PEKALONGAN RUMAH SAKIT ÜMUM DAERAH KRATON INSTALASI LABORATORIUM Jl. Veteran No.31 Telp.(0285)423523,421621 Fax.(0285)-423225

PEKALONGAN

Bangsal/Poli

Tanggal Lahir

Tanggal Cetak

Halaman

Tanggal Periksa

Umur/Jenis Kelamin :

C3

/ Perempuan

Dokter Pasien

No.RM

L.Lolly Pattiselanno, dr. Sp. P LUSIANA SYARIEFAH

Alamat

No.Lab

498473

Tgl. Order: Info Klinik:

20018586

26-06-20 08:34

HASIL

SATUAN

NILAI RUJUKAN

R. Seruni

20-11-1997

1/1

26-06-20 09:15

26-06-20 10:51

22 Th

SERO IMUNOLOGI

PEMERIKSAAN

SARS-CoV-2 IgM SARS-CoV-2 IgG

Negatif Negatif

Negatif Negatif

ODE: LATERAL FLOW

CATATAN: PEMERIKSAAN INI MERUPAKAN PEMERIKSAAN LANJUTAN

TANGGAL 22 JUNI 2020 DENGAN HASIL NEGATIF.

Pemeriksa: YUSWINARTI

Kepala Shift,

Penanggung Jawab Laboratorium,

dr. Maria Abdul Kadir ,SpPK

Otorisasi Oleh: PANTINI

KEMENTERIAN KESEHATAN REPUBLIK INDONESIA Berkas Klaim Individual Pasien

JKN 03/07/2020

Kode Rumah Sakit : 3326011 Kelas Rumah Sakit : B

Nama RS : RSUD KRATON Jenis Tarif : TARIF RS KELAS B PEMERINTAH

Nomor Peserta : 0000614537897 Nomor SEP : 1105R0010620V002414

 Nomor Rekam Medis
 : 498473
 Tanggal Masuk
 : 22/06/2020

 Umur Tahun
 : 22
 Tanggal Keluar
 : 03/07/2020

 Umur Hari
 : 8269
 Jenis Perawatan
 : 1 - Rawat Inap

Tanggal Lahir : 01/11/1997 Cara Pulang : 1 - Atas Persetujuan Dokter

Jenis Kelamin : 2 - Perempuan LOS : 12 hari

Kelas Perawatan : 3 - Kelas 3 Berat Lahir : -

Diagnosa Utama : A19.9 Miliary tuberculosis, unspecified

Diagnosa Sekunder : A01.0 Typhoid fever

Prosedur : 90.59 Microscopic examination of blood, Other microscopic examination

87.49 Other chest x-ray

93.96 Other oxygen enrichment

ADL Sub Acute : - ADL Chronic : -

Hasil Grouping

Total Tarif				Pn	3 308 500 00
Special CMG	:	e e		Rp	0.00
Chronic	:	-	e.	Rp	0.00
Sub Acute	:	2		Rp	0.00
INA-CBG	:	A-4-14-III	PENYAKIT INFEKSI BAKTERI DAN PARASIT LAIN-LAIN (BERAT)	Rp	3,208,500.00

Total Tarif : Rp 3,208,500.00

PEMERINTAH KABUPATEN PEKALONGAN

RUMAH SAKIT UMUM DAERAH KRATON

Jl. Veteran No. 31 Telp. (0285) 421621 - 423523 Fax. 423225 Pekalongan 51116

RINCIAN PEMBAYARAN TAGIHAN PASIEN RAWAT INAP

Frek.

No. Kwitansi Tanggal Kwitansi : KRI030720002102

: 03-07-2020

Sudah Terima Dari

: LUSIANA SYARIEFAH DEWI

Alamat

: KLUNJUKAN RT.003 RW.001 Des.Klujukan

Kec.Sragi Kab.Pekalongan Prov.Jawa Tengah

DPJP : dr.L.Lolly Pattiselanno, Sp.P

Penjamin

No. Surat

Tgl Reg

No RM 498473

Tarif / Harga

: PBI

Nama Pasien : LUSIANA SYARIEFAH DEWI

: 22-06-2020

Untuk Pembayaran

No. Tanggal

: Pembayaran Biaya Rumah Sakit (Rawat Inap)

Keterangan

Uang Sejumlah

· KLUNJUKAN RT.003 RW.001 Des.Klujukan Alamat Pasien

Biaya Penjamin

: 1105R0010620V002414

Kec.Sragi Kab.Pekalongan Prov.Jawa Tengah

Tgl Pulang

: 03-07-2020

Beban Biaya (Tagihan)

	Tunggui	Total angula	1	(Rp)	(Rp)	Tunai (Rp)	Piutang (Rp)
	Akomoda	asi Kamar					
1	22-06-2020	Kamar S.III.A.1 Ruang : Ruang Seruni Kelas : III	1,00	200,000.00	200,000.00	0.00	200,000.00
2	23-06-2020	Kamar S.III.C.3 Ruang : Ruang Seruni Kelas : Non Kela	1,00	200,000.00	200,000.00	0.00	200,000.00
3	24-06-2020	Kamar S.III.C.3 Ruang : Ruang Seruni Kelas : Non Kela	1,00	200,000.00	200,000.00	0.00	200,000.00
4	25-06-2020	Kamar S.III.C.3 Ruang : Ruang Seruni Kelas : Non Kela	1,00	200,000.00	200,000.00	0.00	200,000.00
5	26-06-2020	Kamar PIE.ISO.B.1.9 Ruang : Ruang Isolasi PIE B Kela	1,00	400,000.00	400,000.00	0.00	400,000.00
6	27-06-2020	Kamar PIE.ISO.B.1.9 Ruang : Ruang Isolasi PIE B Kela	1,00	400,000.00	400,000.00	0.00	400,000.00
7	28-06-2020	Kamar PIE.ISO.B.1.9 Ruang : Ruang Isolasi PIE B Kela	1,00	400,000.00	400,000.00	0.00	400,000.00
8	29-06-2020	Kamar PIE.ISO.B.1.9 Ruang : Ruang Isolasi PIE B Kela	1,00	400,000.00	400,000.00	0.00	400,000.00
9	30-06-2020	Kamar PIE.ISO.B.1.9 Ruang : Ruang Isolasi PIE B Kela	1,00	400,000.00	400,000.00	0.00	400,000.00
10	01-07-2020	Kamar S.III.C.7 Ruang : Ruang Seruni Kelas : Non Kela	1,00	200,000.00	200,000.00	0.00	200,000.00
11	02-07-2020	Kamar S.III.C.7 Ruang : Ruang Seruni Kelas : Non Kela	1,00	200,000.00	200,000.00	0.00	200,000.00
12	03-07-2020	Kamar S.III.C.7 Ruang : Ruang Seruni Kelas : Non Kela	1,00	200,000.00	200,000.00	0.00	200,000.00
				Sub Total		0.00	3,400,000.00
	Farmasi /	Obat / Alkes					
13	22-06-2020	Infus set Y dewasa	1,00	9,990.00	9,990.00	0.00	9,990.00
14	22-06-2020	RL infus 500ml	1,00	9,363.60	9,363.60	0.00	9,363.60
15	22-06-2020	Spuit 10cc	1,00	1,795.50	1,795.50	0.00	1,795.50
16	22-06-2020	Aqua inj 25ml otsu	1,00	3,510.00	3,510.00	0.00	3,510.00
17	22-06-2020	Omeprazole 40mg inj	1,00	12,147.54	12,147.54	0.00	12,147.54
18	22-06-2020	Abbocate 22 safety	1,00	27,000.00	27,000.00	0.00	27,000.00
19	22-06-2020	OPSITE IV 3000 5*6CM	1,00	6,381.81	6,381.81	0.00	6,381.81
20	22-06-2020	Alkohol swab	2,00	122.73	245.46	0.00	245.46
21	22-06-2020	Masker N95	1,00	18,187.94	18,187.94	0.00	18,187.94
22	22-06-2020	Handscoon steril 7	1,00	8,093.86	8,093.86	0.00	8,093.86
23	22-06-2020	Paracetamol inf	1,00	14,244.12	14,244.12	0.00	14,244.12
24	22-06-2020	Liquid O2	5,00	6,750.00	33,750.00	0.00	33,750.00
25	22-06-2020	Oksigen Canula Dewasa	1,00	6,094.64	6,094.64	0.00	6,094.64
26	22-06-2020	Codein 10mg	3,00	700.77	2,102.31	0.00	2,102.31
27	22-06-2020	Aqua inj 25ml otsu	1,00	3,510.00	3,510.00	0.00	3,510.00
28	22-06-2020	VACUM EDTA 3ML/VACUMTAINER	2,00	1,067.73	2,135.46	0.00	2,135.46
29	22-06-2020	Omeprazole 40mg inj	2,00	12,147.54	24,295.08	0.00	24,295.08
30	22-06-2020	Ondancentron 4mg inj	3,00	1,379.46	4,138.38	0.00	4,138.38
>	1	. 20.07.2020					

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No.	Tanggal	Keterangan	Frek.	Tarif / Harga	Biaya Penjamin	Beban Biaya	
20		Metamizole Sod 500 inj		(Rp)	(Rp)	Tunai (Rp)	Piutang (Rp)
31	22-06-2020		2,00	4,295.46	8,590.92	0.00	8,590.92
32	22-06-2020	Codein 10mg	3,00	700.77	2,102.31	0.00	2,102.31
33	22-06-2020	Spuit 10cc	2,00	1,526.89	3,053.78	0.00	3,053.78
34	22-06-2020	Spuit 3cc	2,00	1,134.00	2,268.00	0.00	2,268.00
35	22-06-2020	Futrolit inf	2,00	48,188.86	96,377.72	0.00	96,377.72
36	22-06-2020	Moxifloxacin 400mg 250ml	1,00	229,500.00	229,500.00	0.00	229,500.00
37	22-06-2020	Tranfusi set	1,00	17,152.37	17,152.37	0.00	17,152.37
38	22-06-2020	Infus set Y dewasa	1,00	9,990.00	9,990.00	0.00	9,990.00
39	22-06-2020	Abbocate 22 safety	1,00	27,000.00	27,000.00	0.00	27,000.00
40	23-06-2020	Spuit 10cc	2,00	1,526.89	3,053.78	0.00	3,053.78
41	23-06-2020	Metamizole Sod 500 inj	2,00	4,295.46	8,590.92	0.00	8,590.92
42	23-06-2020	Ondancentron 4mg inj	3,00	1,379.46	4,138.38	0.00	4,138.38
43	23-06-2020	Omeprazole 40mg inj	2,00	12,755.04	25,510.08	0.00	25,510.08
44	23-06-2020	Moxifloxacin 400mg 250ml	1,00	229,500.00	229,500.00	0.00	229,500.00
45	23-06-2020	Liquid O2	5,00	6,750.00	33,750.00	0.00	33,750.00
46	23-06-2020	Masker Nebulizer Dewasa (XL)	1,00	19,134.41	19,134.41	0.00	19,134.41
47	23-06-2020	VACUM EDTA 3ML/VACUMTAINER	2,00	1,067.73	2,135.46	0.00	2,135.46
48	23-06-2020	Aqua inj 25ml otsu	1,00	3,510.00	3,510.00	0.00	3,510.00
49	23-06-2020	Spuit 3cc	3,00	1,134.00	3,402.00	0.00	3,402.00
50	24-06-2020	Futrolit inf	1,00	48,188.86	48,188.86	0.00	48,188.86
51	24-06-2020	Moxifloxacin 400mg 250ml	1,00	229,500.00	229,500.00	0.00	229,500.00
52	24-06-2020	Omeprazole 40mg inj	1 1	12,755.04	25,510.08	0.00	25,510.08
53	24-06-2020	Ondancentron 4mg inj	2,00				57607500000101000
	24-06-2020	Codein 10mg	3,00	1,379.46	4,138.38	0.00	4,138.38
54	1	Metamizole Sod 500 inj	3,00	700.77	2,102.31	0.00	2,102.31
55	24-06-2020	Codein 10mg	2,00	4,295.46	8,590.92	0.00	8,590.92
56	24-06-2020	Spuit 10cc	3,00	700.77	2,102.31	0.00	2,102.31
57	24-06-2020	The state of the s	3,00	1,526.89	4,580.67	0.00	4,580.67
58	24-06-2020	Spuit 3cc	5,00	1,134.00	5,670.00	0.00	5,670.00
59	24-06-2020	Abbocate 22 safety	2,00	27,000.00	54,000.00	0.00	54,000.00
60	24-06-2020	Handscoon Nitril M	30,00	661.50	19,845.00	0.00	19,845.00
61	25-06-2020	Codein 10mg	3,00	700.77	2,102.31	0.00	2,102.31
62	25-06-2020	Metamizole Sod 500 inj	2,00	4,295.46	8,590.92	0.00	8,590.92
63	25-06-2020	Ondancentron 4mg inj	3,00	1,379.46	4,138.38	0.00	4,138.38
64	25-06-2020	Omeprazole 40mg inj	2,00	12,147.54	24,295.08	0.00	24,295.08
65	25-06-2020	Futrolit inf	1,00	48,188.86	48,188.86	0.00	48,188.86
66	25-06-2020	Aqua inj 25ml otsu	1,00	3,510.00	3,510.00	0.00	3,510.00
67	25-06-2020	Infus set Y dewasa	1,00	9,990.00	9,990.00	0.00	9,990.00
68	25-06-2020	Tranfusi set	1,00	17,152.37	17,152.37	0.00	17,152.37
69	25-06-2020	Spuit 3cc	5,00	1,134.00	5,670.00	0.00	5,670.00
70	25-06-2020	Spuit 10cc	3,00	1,526.89	4,580.67	0.00	4,580.67
71	25-06-2020	Meropenem 1gr inj	2,00	39,696.08	79,392.16	0.00	79,392.16
72	25-06-2020	Masker KN95	1,00	39,150.00	39,150.00	0.00	39,150.00
73	25-06-2020	Topi perawat (nurse) hijau	2,00	409.79	819.58	0.00	819.58
	igal Print	: 30-07-2020				- Halaman	*****

No.	Tanggal	Keterangan	Frek.	Tarif / Harga	Biaya Penjamin	Beban Biaya	
	100000000000000000000000000000000000000	Masker Visor	7080020	(Rp)	(Rp)	Tunai (Rp)	Piutang (Rp)
74	25-06-2020	\$ 100 miles	2,00	0.00	0.00	0.00	0.00
75	25-06-2020	Handscoon Los M	10,00	577.44	5,774.40	0.00	5,774.40
76	25-06-2020	Alkohol Swab Antiseptic	10,00	218.75	2,187.50	0.00	2,187.50
77	26-06-2020	Aqua inj 25ml otsu	1,00	3,510.00	3,510.00	0.00	3,510.00
78	26-06-2020	Alkohol Swab Antiseptic	10,00	218.75	2,187.50	0.00	2,187.50
79	26-06-2020	Handscoon Los M	20,00	577.44	11,548.80	0.00	11,548.80
80	26-06-2020	Masker Visor	2,00	0.00	0.00	0.00	0.00
81	26-06-2020	Topi perawat (nurse) hijau	2,00	409.79	819.58	0.00	819.58
82	26-06-2020	Masker KN95	1,00	39,150.00	39,150.00	0.00	39,150.00
83	26-06-2020	Omeprazole 40mg inj	2,00	12,147.54	24,295.08	0.00	24,295.08
84	26-06-2020	Infus set Y dewasa	1,00	9,990.00	9,990.00	0.00	9,990.00
85	26-06-2020	Futrolit inf	1,00	48,188.86	48,188.86	0.00	48,188.86
86	26-06-2020	Ondancentron 4mg inj	3,00	1,379.46	4,138.38	0.00	4,138.38
87	: 26-06-2020	Stikpan Pispot	1,00	36,450.00	36,450.00	0.00	36,450.00
88	26-06-2020	N-ACE 100mg/ml inj	1,00	12,272.73	12,272.73	0.00	12,272.73
89	26-06-2020	Nacl 100ml PiggyBack	1,00	9,327.15	9,327.15	0.00	9,327.15
90	26-06-2020	Metamizole Sod 500 inj	2,00	4,295.46	8,590.92	0.00	8,590.92
91	26-06-2020	Codein 10mg	3,00	700.77	2,102.31	0.00	2,102.31
92	26-06-2020	Meropenem 1gr inj	2,00	39,696.08	79,392.16	0.00	79,392.16
93	26-06-2020	Spuit 10cc	3,00	1,526.89	4,580.67	0.00	4,580.67
94	26-06-2020	Spuit 3cc	5,00	1,134.00	5,670.00	0.00	5,670.00
95	26-06-2020	Tranfusi set	1 1			11.00	
96	27-06-2020	Spuit 10cc	1,00	17,152.37	17,152.37	0.00	17,152.37
		Spuit 5cc	2,00	1,526.89	3,053.78	0.00	3,053.78
97	27-06-2020	Spuit 3cc	4,00	1,087.10	4,348.40	0.00	4,348.40
98	27-06-2020	Resfar 200mg/ml inj	4,00	1,134.00	4,536.00	0.00	4,536.00
99	27-06-2020	# 2	1,00	225,666.00	225,666.00	0.00	225,666.00
100	27-06-2020	Codein 10mg	3,00	700.77	2,102.31	0.00	2,102.31
101	27-06-2020	Metamizole Sod 500 inj	2,00	4,295.46	8,590.92	0.00	8,590.92
102	27-06-2020	Ermuno tab	2,00	1,197.00	2,394.00	0.00	2,394.00
103	27-06-2020	Sanfuliq tab	2,00	2,396.16	4,792.32	0.00	4,792.32
104	27-06-2020	U pad 60*90cm	3,00	4,295.46	12,886.38	0.00	12,886.38
105	27-06-2020	Ondancentron 4mg inj	3,00	1,379.46	4,138.38	0.00	4,138.38
106	27-06-2020	Omeprazole 40mg inj	2,00	12,147.54	24,295.08	0.00	24,295.08
107	27-06-2020	Meropenem 1gr inj	2,00	39,696.08	79,392.16	0.00	79,392.16
108	27-06-2020	Futrolit inf	2,00	48,188.86	96,377.72	0.00	96,377.72
109	28-06-2020	Spuit 1cc	1,00	972.39	972.39	0.00	972.39
110	28-06-2020	Spuit 3cc	3,00	1,134.00	3,402.00	0.00	3,402.00
111	28-06-2020	Spuit 10cc	5,00	1,526.89	7,634.45	0.00	7,634.45
112	28-06-2020	Abbocate 22 safety	1,00	27,000.00	27,000.00	0.00	27,000.00
113	28-06-2020	Infus set Y dewasa	1,00	9,990.00	9,990.00	0.00	9,990.00
114	28-06-2020	Aqua inj 25ml otsu	1,00	3,510.00	3,510.00	0.00	3,510.00
115	28-06-2020	Spuit 5cc	3,00	1,087.10	3,261.30	0.00	3,261.30
116	28-06-2020	Codein 10mg	3,00	700.77	2,102.31	0.00	2,102.31
							W

2020 Meropenem 1gr inj 2020 Omeprazole 40mg inj 2020 Ondancentron 4mg inj 2020 Metamizole Sod 500 inj 2020 Resfar 200mg/ml inj 2020 Nacl 500ml inf wida 2020 Sanfuliq tab 2020 Ermuno tab 2020 Futrolit inf 2020 Paracetamol inf 2020 Spuit 5cc 2020 Cover All (Donasi)	2,00 2,00 3,00 2,00 1,00 1,00 2,00 2,00 2,00 2,00	39,696.08 12,147.54 1,379.46 4,295.46 225,666.00 8,394.30 2,396.16 1,209.33 48,188.86	79,392.16 24,295.08 4,138.38 8,590.92 225,666.00 8,394.30 4,792.32 2,418.66	Tunai (Rp) 0.00 0.00 0.00 0.00 0.00 0.00	Piutang (Rp) 79,392.16 24,295.08 4,138.38 8,590.92 225,666.00 8,394.30
Omeprazole 40mg inj Ondancentron 4mg inj Metamizole Sod 500 inj Resfar 200mg/ml inj Nacl 500ml inf wida Sanfuliq tab Ermuno tab Futrolit inf Paracetamol inf Spuit 5cc	2,00 3,00 2,00 1,00 1,00 2,00 2,00 2,00	12,147.54 1,379.46 4,295.46 225,666.00 8,394.30 2,396.16 1,209.33	24,295.08 4,138.38 8,590.92 225,666.00 8,394.30 4,792.32	0.00 0.00 0.00 0.00	24,295.08 4,138.38 8,590.92 225,666.00
Ondancentron 4mg inj Metamizole Sod 500 inj Resfar 200mg/ml inj Nacl 500ml inf wida Sanfuliq tab Ermuno tab Futrolit inf Paracetamol inf Spuit 5cc	3,00 2,00 1,00 1,00 2,00 2,00	1,379.46 4,295.46 225,666.00 8,394.30 2,396.16 1,209.33	4,138.38 8,590.92 225,666.00 8,394.30 4,792.32	0.00 0.00 0.00	4,138.38 8,590.92 225,666.00
2020 Metamizole Sod 500 inj 2020 Resfar 200mg/ml inj 2020 Nacl 500ml inf wida 2020 Sanfuliq tab 2020 Ermuno tab 2020 Futrolit inf 2020 Paracetamol inf 2020 Spuit 5cc	2,00 1,00 1,00 2,00 2,00 2,00	4,295.46 225,666.00 8,394.30 2,396.16 1,209.33	8,590.92 225,666.00 8,394.30 4,792.32	0.00 0.00 0.00	8,590.92 225,666.00
Resfar 200mg/ml inj Nacl 500ml inf wida Sanfuliq tab Ermuno tab Futrolit inf Paracetamol inf Spuit 5cc	1,00 1,00 2,00 2,00 2,00	225,666.00 8,394.30 2,396.16 1,209.33	225,666.00 8,394.30 4,792.32	0.00	225,666.00
Nacl 500ml inf wida Sanfuliq tab Ermuno tab Futrolit inf Paracetamol inf Spuit 5cc	1,00 2,00 2,00 2,00	8,394.30 2,396.16 1,209.33	8,394.30 4,792.32	0.00	Gasta Tames access
Sanfuliq tab Ermuno tab Futrolit inf Paracetamol inf Spuit 5cc	2,00 2,00 2,00	2,396.16 1,209.33	4,792.32	1.0000000	8,394.30
Ermuno tab 2020 Futrolit inf 2020 Paracetamol inf 2020 Spuit 5cc	2,00 2,00	1,209.33		0.00	
2020 Futrolit inf 2020 Paracetamol inf 2020 Spuit 5cc	2,00		2,418.66	200 000 000	4,792.32
2020 Paracetamol inf 2020 Spuit 5cc		48 188 86		0.00	2,418.66
2020 Spuit 5cc	2,00	40,100.00	96,377.72	0.00	96,377.72
2020		14,244.12	28,488.24	0.00	28,488.24
2020 Cover All (Donasi)	5,00	1,087.10	5,435.50	0.00	5,435.50
201 and the second seco	1,00	0.00	0.00	0.00	0.00
2020 Alkohol Swab Antiseptic	50,00	218.75	10,937.50	0.00	10,937.50
2020 Handscoon Panjang L	2,00	49,956.48	99,912.96	0.00	99,912.96
2020 Handscoon Nitril L	25,00	835.02	20,875.50	0.00	20,875.50
2020 Handscoon steril 7.5	13,00	8,093.86	105,220.18	0.00	105,220.18
2020 Sanfuliq tab	2,00	2,396.16	4,792.32	0.00	4,792.32
2020 Aqua 1 liter unicap	1,00	12,885.75	12,885.75	0.00	12,885.75
2020 Handscoon steril 7	13,00	8,093.86	105,220.18	0.00	105,220.18
2020 Cover All suit	2,00	92,045.46	184,090.92	0.00	184,090.92
2020 Futrolit inf	1,00	48,188.86	48,188.86	0.00	48,188.86
2020 Spuit 10cc			7,634.45	0.00	
2020 Codein 10mg	5,00	1,526.89		1.00000000	7,634.45
5	3,00	700.77	2,102.31	0.00	2,102.31
2020	2,00	1,209.33	2,418.66	0.00	2,418.66
2020	1,00	73,145.70	73,145.70	0.00	73,145.70
	3,00	700.77	2,102.31	0.00	2,102.31
2020 Spuit 3cc	5,00	1,134.00	5,670.00	0.00	5,670.00
2020 Ondancentron 4mg inj	3,00	1,379.46	4,138.38	0.00	4,138.38
2020 Resfar 200mg/ml inj	1,00	225,666.00	225,666.00	0.00	225,666.00
2020 Omeprazole 40mg inj	2,00	12,147.54	24,295.08	0.00	24,295.08
2020 Meropenem 1gr inj	2,00	39,696.08	79,392.16	0.00	79,392.16
2020 Paracetamol inf	2,00	14,244.12	28,488.24	0.00	28,488.24
2020 Pirazinamide 500mg tab	2,00	366.05	732.10	0.00	732.10
2020 Topi Perawat (Hijau)	2,00	409.79	819.58	0.00	819.58
2020 Masker KN95	1,00	39,150.00	39,150.00	0.00	39,150.00
2020 Alkohol Swab Antiseptic	10,00	218.75	2,187.50	0.00	2,187.50
2020 Resfar 200mg/ml inj	1,00	225,666.00	225,666.00	0.00	225,666.00
2020 Sanfuliq tab	2,00	2,396.16	4,792.32	0.00	4,792.32
2020 Ermuno tab	2,00	1,197.00	2,394.00	0.00	2,394.00
2020 Merimac 450mg cap	1,00	1,458.00	1,458.00	0.00	1,458.00
2020 Isoniazid 100mg (INH 100mg)	3,00	88.36	265.08	0.00	265.08
■ M ■ M. B.		549.10			1,098.20
2020 Ethambutol 500mg tab	(6)	1			37,800.00
20 20 20 20 20 20	Pirazinamide 500mg tab Topi Perawat (Hijau) Masker KN95 Alkohol Swab Antiseptic Resfar 200mg/ml inj Sanfuliq tab Ermuno tab Merimac 450mg cap Isoniazid 100mg (INH 100mg)	020 Pirazinamide 500mg tab 2,00 020 Topi Perawat (Hijau) 2,00 020 Masker KN95 1,00 020 Alkohol Swab Antiseptic 10,00 020 Resfar 200mg/ml inj 1,00 020 Sanfuliq tab 2,00 020 Ermuno tab 2,00 020 Merimac 450mg cap 1,00 020 Isoniazid 100mg (INH 100mg) 3,00 020 Ethambutol 500mg tab 2,00	Pirazinamide 500mg tab 2,00 366.05 Topi Perawat (Hijau) 2,00 409.79 Masker KN95 1,00 39,150.00 20 Alkohol Swab Antiseptic 10,00 218.75 Resfar 200mg/ml inj 1,00 225,666.00 20 Sanfuliq tab 2,00 2,396.16 Ermuno tab 2,00 1,197.00 Merimac 450mg cap 1,00 1,458.00 120 Isoniazid 100mg (INH 100mg) 3,00 88.36 Ethambutol 500mg tab 2,00 549.10	Pirazinamide 500mg tab 2,00 366.05 732.10 200 Topi Perawat (Hijau) 2,00 409.79 819.58 200 Masker KN95 1,00 39,150.00 39,150.00 201 Alkohol Swab Antiseptic 10,00 218.75 2,187.50 202 Resfar 200mg/ml inj 1,00 225,666.00 225,666.00 203 Sanfuliq tab 2,00 2,396.16 4,792.32 Emuno tab 2,00 1,197.00 2,394.00 204 Merimac 450mg cap 1,00 1,458.00 1,458.00 205 Isoniazid 100mg (INH 100mg) 3,00 88.36 265.08 206 Masker Tip ap	Pirazinamide 500mg tab 2,00 366.05 732.10 0.00 7020 Topi Perawat (Hijau) 2,00 409.79 819.58 0.00 020 Masker KN95 1,00 39,150.00 39,150.00 0.00 Alkohol Swab Antiseptic 10,00 218.75 2,187.50 0.00 020 Resfar 200mg/ml inj 1,00 225,666.00 020 Sanfuliq tab 2,00 2,396.16 4,792.32 0.00 020 Ermuno tab 2,00 1,197.00 2,394.00 0.00 020 Merimac 450mg cap 1,00 1,458.00 1,458.00 0.00

161 30-0 162 30-0 163 30-0 164 30-0 165 30-0 166 30-0 167 30-0 168 30-0 170 30-0 171 01-0 172 01-0 173 01-0 174 01-0	0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-07-2020 0-07-2020 0-07-2020	Masker KN95 Omeprazole 40mg inj Ondancentron 4mg inj Meropenem 1gr inj Paracetamol inf COVER ALL SUIT Handscoon Nitril L Handscoon Nitril M Aqua inj 25ml otsu Spuit 10cc Spuit 3cc Resfar 200mg/ml inj Meropenem 1gr inj Codein 10mg	1,00 2,00 3,00 2,00 2,00 3,00 28,00 28,00 1,00 3,00 3,00 1,00	39,150.00 12,147.54 1,379.46 39,696.08 14,244.12 123,193.64 835.02 835.02 3,510.00 1,526.89 1,134.00 225,666.00	39,150.00 24,295.08 4,138.38 79,392.16 28,488.24 369,580.92 23,380.56 23,380.56 3,510.00 4,580.67 3,402.00	Tunai (Rp) 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Piutang (Rp) 39,150.00 24,295.08 4,138.38 79,392.16 28,488.24 369,580.92 23,380.56 23,380.56 3,510.00 4,580.67 3,402.00
161 30-0 162 30-0 163 30-0 164 30-0 165 30-0 166 30-0 167 30-0 168 30-0 170 30-0 171 01-0 172 01-0 173 01-0 174 01-0	0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-07-2020 0-07-2020 0-07-2020	Omeprazole 40mg inj Ondancentron 4mg inj Meropenem 1gr inj Paracetamol inf COVER ALL SUIT Handscoon Nitril L Handscoon Nitril M Aqua inj 25ml otsu Spuit 10cc Spuit 3cc Resfar 200mg/ml inj Meropenem 1gr inj	2,00 3,00 2,00 2,00 3,00 28,00 1,00 3,00 3,00 1,00	12,147.54 1,379.46 39,696.08 14,244.12 123,193.64 835.02 835.02 3,510.00 1,526.89 1,134.00	24,295.08 4,138.38 79,392.16 28,488.24 369,580.92 23,380.56 23,380.56 3,510.00 4,580.67	0.00 0.00 0.00 0.00 0.00 0.00 0.00	24,295.08 4,138.38 79,392.16 28,488.24 369,580.92 23,380.56 23,380.56 3,510.00 4,580.67
162 30-0 163 30-0 164 30-0 165 30-0 166 30-0 167 30-0 169 30-0 170 30-0 171 01-0 172 01-0 173 01-0	0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-07-2020 0-07-2020 0-07-2020	Ondancentron 4mg inj Meropenem 1gr inj Paracetamol inf COVER ALL SUIT Handscoon Nitril L Handscoon Nitril M Aqua inj 25ml otsu Spuit 10cc Spuit 3cc Resfar 200mg/ml inj Meropenem 1gr inj	3,00 2,00 2,00 3,00 28,00 28,00 1,00 3,00 3,00 1,00	1,379.46 39,696.08 14,244.12 123,193.64 835.02 835.02 3,510.00 1,526.89 1,134.00	4,138.38 79,392.16 28,488.24 369,580.92 23,380.56 23,380.56 3,510.00 4,580.67	0.00 0.00 0.00 0.00 0.00 0.00	4,138.38 79,392.16 28,488.24 369,580.92 23,380.56 23,380.56 3,510.00 4,580.67
163 30-0 164 30-0 165 30-0 166 30-0 167 30-0 169 30-0 170 30-0 171 01-0 172 01-0 173 01-0	0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-07-2020 0-07-2020 0-07-2020	Meropenem 1gr inj Paracetamol inf COVER ALL SUIT Handscoon Nitril L Handscoon Nitril M Aqua inj 25ml otsu Spuit 10cc Spuit 3cc Resfar 200mg/ml inj Meropenem 1gr inj	2,00 2,00 3,00 28,00 1,00 3,00 3,00 1,00	39,696.08 14,244.12 123,193.64 835.02 835.02 3,510.00 1,526.89 1,134.00	79,392.16 28,488.24 369,580.92 23,380.56 23,380.56 3,510.00 4,580.67	0.00 0.00 0.00 0.00 0.00	79,392.16 28,488.24 369,580.92 23,380.56 23,380.56 3,510.00 4,580.67
164 30-0 165 30-0 166 30-0 167 30-0 168 30-0 170 30-0 171 01-0 172 01-0 173 01-0	0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-07-2020 0-07-2020 0-07-2020	Paracetamol inf COVER ALL SUIT Handscoon Nitril L Handscoon Nitril M Aqua inj 25ml otsu Spuit 10cc Spuit 3cc Resfar 200mg/ml inj Meropenem 1gr inj	2,00 3,00 28,00 28,00 1,00 3,00 3,00 1,00	14,244.12 123,193.64 835.02 835.02 3,510.00 1,526.89 1,134.00	28,488.24 369,580.92 23,380.56 23,380.56 3,510.00 4,580.67	0.00 0.00 0.00 0.00 0.00	28,488.24 369,580.92 23,380.56 23,380.56 3,510.00 4,580.67
165 30-0 166 30-0 167 30-0 168 30-0 169 30-0 170 30-0 171 01-0 172 01-0 173 01-0	0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-07-2020 0-07-2020 0-07-2020	COVER ALL SUIT Handscoon Nitril L Handscoon Nitril M Aqua inj 25ml otsu Spuit 10cc Spuit 3cc Resfar 200mg/ml inj Meropenem 1gr inj	3,00 28,00 28,00 1,00 3,00 3,00 1,00	123,193.64 835.02 835.02 3,510.00 1,526.89 1,134.00	369,580.92 23,380.56 23,380.56 3,510.00 4,580.67	0.00 0.00 0.00 0.00	369,580.92 23,380.56 23,380.56 3,510.00 4,580.67
166 30-0 167 30-0 168 30-0 169 30-0 170 30-0 171 01-0 172 01-0 173 01-0	0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-07-2020 0-07-2020 0-07-2020	Handscoon Nitril L Handscoon Nitril M Aqua inj 25ml otsu Spuit 10cc Spuit 3cc Resfar 200mg/ml inj Meropenem 1gr inj	28,00 28,00 1,00 3,00 3,00 1,00	835.02 835.02 3,510.00 1,526.89 1,134.00	23,380.56 23,380.56 3,510.00 4,580.67	0.00 0.00 0.00 0.00	23,380.56 23,380.56 3,510.00 4,580.67
167 30-0 168 30-0 169 30-0 170 30-0 171 01-0 172 01-0 173 01-0	0-06-2020 0-06-2020 0-06-2020 0-06-2020 0-07-2020 0-07-2020 0-07-2020	Handscoon Nitril M Aqua inj 25ml otsu Spuit 10cc Spuit 3cc Resfar 200mg/ml inj Meropenem 1gr inj	28,00 1,00 3,00 3,00 1,00	835.02 3,510.00 1,526.89 1,134.00	23,380.56 3,510.00 4,580.67	0.00 0.00 0.00	23,380.56 3,510.00 4,580.67
168 30-0 169 30-0 170 30-0 171 01-0 172 01-0 173 01-0	0-06-2020 0-06-2020 0-06-2020 0-07-2020 0-07-2020 0-07-2020	Aqua inj 25ml otsu Spuit 10cc Spuit 3cc Resfar 200mg/ml inj Meropenem 1gr inj	1,00 3,00 3,00 1,00	3,510.00 1,526.89 1,134.00	3,510.00 4,580.67	0.00	3,510.00 4,580.67
169 30-0 170 30-0 171 01-0 172 01-0 173 01-0	0-06-2020 0-06-2020 0-07-2020 0-07-2020 0-07-2020	Spuit 10cc Spuit 3cc Resfar 200mg/ml inj Meropenem 1gr inj	3,00 3,00 1,00	1,526.89 1,134.00	4,580.67	0.00	4,580.67
170 30-0 171 01-0 172 01-0 173 01-0 174 01-0	-07-2020 -07-2020 -07-2020 -07-2020	Spuit 3cc Resfar 200mg/ml inj Meropenem 1gr inj	3,00 1,00	1,134.00			
171 01-0 172 01-0 173 01-0 174 01-0	-07-2020 -07-2020 -07-2020 -07-2020	Resfar 200mg/ml inj Meropenem 1gr inj	1,00	700	3,402.00	0.00	3 402 00
172 01-0 173 01-0 174 01-0	-07-2020 -07-2020 -07-2020	Meropenem 1gr inj		225,666,00			0,402.00
173 01-0 174 01-0	-07-2020 -07-2020		2.00	,000.00	225,666.00	0.00	225,666.00
174 01-0	-07-2020	Codein 10mg	2,00	39,696.08	79,392.16	0.00	79,392.16
			3,00	700.77	2,102.31	0.00	2,102.31
175 01-0	-07-2020	Ondancentron 4mg inj	3,00	1,379.46	4,138.38	0.00	4,138.38
		Omeprazole 40mg inj	2,00	12,147.54	24,295.08	0.00	24,295.08
: 176 01-0	-07-2020	Alkohol Swab Antiseptic	10,00	218.75	2,187.50	0.00	2,187.50
177 01-0	-07-2020	Masker Visor	2,00	0.00	0.00	0.00	0.00
178 01-0	-07-2020	Topi perawat (nurse) hijau	2,00	409.79	819.58	0.00	819.58
	-07-2020	Masker KN95	1,00	39,150.00	39,150.00	0.00	39,150.00
	-07-2020	Sanfuliq tab	2,00	2,396.16	4,792.32	0.00	4,792.32
	-07-2020	Ermuno tab	2,00	1,197.00	2,394.00	0.00	2,394.00
	-07-2020	Isoniazid 100mg (INH 100mg)	1 1	88.36	265.08	0.00	265.08
	-07-2020	Ethambutol 500mg tab	3,00				
		Pirazinamide 500mg tab	2,00	549.10	1,098.20	0.00	1,098.20
	-07-2020	Merimac 450mg cap	2,00	366.05	732.10	0.00	732.10
	-07-2020	Spuit 10cc	1,00	1,458.00	1,458.00	0.00	1,458.00
	-07-2020		3,00	1,526.89	4,580.67	0.00	4,580.67
	-07-2020	Spuit 3cc	3,00	1,134.00	3,402.00	0.00	3,402.00
188 01-0	-07-2020	Tranfusi set	1,00	17,152.37	17,152.37	0.00	17,152.37
189 01-0	-07-2020	Aqua inj 25ml otsu	1,00	3,510.00	3,510.00	0.00	3,510.00
190 02-0	2-07-2020	Merimac 450mg cap	1,00	1,458.00	1,458.00	0.00	1,458.00
191 02-0	2-07-2020	Ermuno tab	2,00	1,209.33	2,418.66	0.00	2,418.66
192 02-0	-07-2020	Sanfuliq tab	2,00	2,396.16	4,792.32	0.00	4,792.32
193 02-0	2-07-2020	Paracetamol inf	2,00	14,244.12	28,488.24	0.00	28,488.24
194 02-0	2-07-2020	Meropenem 1gr inj	2,00	39,696.08	79,392.16	0.00	79,392.16
195 02-0	2-07-2020	Codein 10mg	3,00	700.77	2,102.31	0.00	2,102.31
196 02-0	2-07-2020	Alkohol Swab Antiseptic	10,00	218.75	2,187.50	0.00	2,187.50
197 02-0	2-07-2020	Handscoon Los M	20,00	577.44	11,548.80	0.00	11,548.80
198 02-0	2-07-2020	Resfar 200mg/ml inj	1,00	225,666.00	225,666.00	0.00	225,666.00
199 02-0	2-07-2020	Pirazinamide 500mg tab	2,00	366.05	732.10	0.00	732.10
200 02-0	-07-2020	Ethambutol 500mg tab	2,00	549.10	1,098.20	0.00	1,098.20
201 02-0	2-07-2020	Isoniazid 100mg (INH 100mg)	3,00	88.36	265.08	0.00	265.08
202 02-0	2-07-2020	Ondancentron 4mg inj	3,00	1,379.46	4,138.38	0.00	4,138.38

No.	Tanggal	Keterangan	Frek.	Tarif / Harga (Rp)	Biaya Penjamin (Rp)	Beban Biaya Tunai (Rp)	(Tagihan) Piutang (Rp)
203	02-07-2020	Omeprazole 40mg inj	2,00	12,147.54	24,295.08	0.00	24,295.08
204	03-07-2020	Curcuma tab		896.06	and the second	200	0.0000000000000000000000000000000000000
	03-07-2020	Sucralfat syr 500mg	15,00		13,440.90	0.00	13,440.90
205		Lansoprazole 30mng caps	1,00	8,332.20	8,332.20	0.00	8,332.20
206	03-07-2020	Pirazinamide 500mg tab	10,00	396.41	3,964.10	0.00	3,964.10
207	03-07-2020	Ethambutol 500mg tab	10,00	366.05	3,660.50	0.00	3,660.50
208	03-07-2020		10,00	549.10	5,491.00	0.00	5,491.00
209	03-07-2020	Isoniazid 100mg (INH 100mg)	15,00	88.36	1,325.40	0.00	1,325.40
210	03-07-2020	Merimac 450mg cap	5,00	1,458.00	7,290.00	0.00	7,290.00
				Sub Total		0.00	5,729,379.77
211	22-06-2020	SGPT	1.00	42 000 00	42,000,00	0.00	42.000.00
	3	WIDAL	1,00	42,000.00	42,000.00	0.00	42,000.00
212	22-06-2020	Rapid Sars Cov-2 Antibody	1,00	28,000.00	28,000.00	0.00	28,000.00
213	22-06-2020	C-REAKTIF PROTEIN (CRP)	1,00	335,000.00	335,000.00	0.00	335,000.00
214	22-06-2020		4,00	28,000.00	112,000.00	0.00	112,000.00
215	22-06-2020	HEMA DIFF	1,00	65,000.00	65,000.00	0.00	65,000.00
216	22-06-2020	LED	1,00	35,000.00	35,000.00	0.00	35,000.00
217	22-06-2020	GLUKOSA (Sewaktu)	1,00	34,000.00	34,000.00	0.00	34,000.00
218	22-06-2020	UREUM	1,00	36,000.00	36,000.00	0.00	36,000.00
219	22-06-2020	CREATININ	1,00	50,000.00	50,000.00	0.00	50,000.00
220	22-06-2020	SGOT	1,00	42,000.00	42,000.00	0.00	42,000.00
221	25-06-2020	LED	1,00	35,000.00	35,000.00	0.00	35,000.00
222	25-06-2020	HEMA DIFF	1,00	65,000.00	65,000.00	0.00	65,000.00
223	26-06-2020	Rapid Sars Cov-2 Antibody	1,00	335,000.00	335,000.00	0.00	335,000.00
224	26-06-2020	HIV Program	1,00	35,000.00	35,000.00	0.00	35,000.00
225	28-06-2020	DENGUE BLOT IgG-IgM	1,00	100,000.00	100,000.00	0.00	100,000.00
	¥4	₩	2 - 1	Sub Total		0.00	1,349,000.00
	LABORAT	ORIUM MIKROBIOLOGI					3233323333
226	29-06-2020	Kultur Dan Senst Darah	1,00	486,000.00	486,000.00	0.00	486,000.00
227	01-07-2020	Kultur Dan Senst Darah	1,00	486,000.00	486,000.00	0.00	486,000.00
				Sub Total		0.00	972,000.00
Live		AN TINDAKAN DAN ASUHAN KEPERAWAT Asuhan Keperawatan Ketergantungan Sedang	10 (A 10 (A)	100000000000000000000000000000000000000			
228	22-06-2020		1,00	44,000.00	44,000.00	0.00	44,000.00
229	22-06-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
230	23-06-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
231	24-06-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
232	25-06-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
233	26-06-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
234	27-06-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
235	28-06-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
236	29-06-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
237	30-06-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
238	01-07-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
239	02-07-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
240	03-07-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
670		and the second s				0.00	

No.	Tanggal	Keterangan	Frek.	Tarif / Harga (Rp)	Biaya Penjamin (Rp)	Beban Biaya Tunai (Rp)	(Tagihan) Piutang (Rp)
241	03-07-2020	Asuhan Keperawatan Ketergantungan Sedang	1,00	44,000.00	44,000.00	0.00	44,000.00
	:		1 1	Sub Total		0.00	616,000.0
	RADIOLO	GI			2	0.00	610,000.0
242	22-06-2020	THORAX AP	1,00	98,000.00	98,000.00	0.00	98,000.00
243	24-06-2020	THORAX AP	1,00	98,000.00	98,000.00	0.00	98,000.00
244	29-06-2020	THORAX AP	1,00	98,000.00	98,000.00	0.00	98,000.00
245	02-07-2020	THORAX AP	1,00	98,000.00	98,000.00	0.00	98,000.00
	Sub Total						392,000.0
	RAWAT D						
246	22-06-2020	PEMERIKSAAN IGD DOKTER UMUM / GIGI	1,00	52,000.00	52,000.00	0.00	52,000.00
				Sub Total		0.00	52,000.0
247	1	N NON OPERATIF Pasang Infus			20.000.00		
247	22-06-2020	Injeksi	1,00	80,000.00	80,000.00	0.00	80,000.00
248	22-06-2020		1,00	5,000.00	5,000.00	0.00	5,000.00
249	22-06-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
250	23-06-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
251	24-06-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
252	25-06-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
253	25-06-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
254	25-06-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
255	26-06-2020	Pasang Infus	1,00	80,000.00	80,000.00	0.00	80,000.00
256	26-06-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
257	26-06-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
258	27-06-2020	Injeksi	3,00	5,000.00	15,000.00	0.00	15,000.00
259	28-06-2020	Injeksi	2,00	5,000.00	10,000.00	0.00	10,000.00
260	29-06-2020	Injeksi	3,00	5,000.00	15,000.00	0.00	15,000.00
261	30-06-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
262	30-06-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
263	30-06-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
264	01-07-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
265	01-07-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
266	01-07-2020	: Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
267	02-07-2020	Pasang Infus	1 2 1				
268	02-07-2020	Injeksi	1,00	80,000.00	80,000.00	0.00	80,000.00
	02-07-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
269 270	03-07-2020	Injeksi	1,00	5,000.00	5,000.00	0.00	5,000.00
2/0	03-07-2020		1,00	5,000.00	5,000.00	0.00	5,000.00
	TINDAKA	N SPESIALIS PENYAKIT DALAM		Sub Total	- :	0.00	370,000.0
271	22-06-2020	Terapi oksigen	1,00	20,000.00	20,000.00	0.00	20,000.00
272	27-06-2020	Terapi oksigen	1,00	20,000.00	20,000.00	0.00	20,000.00
273	29-06-2020	Terapi oksigen	1,00	20,000.00	20,000.00	0.00	20,000.00
274	01-07-2020	Terapi oksigen	1,00	20,000.00	20,000.00	0.00	20,000.00
	, 01 2020	\$	16 (2000 E)	Sub Total	20,000,00		00088000000
_	VISITE DO	OKTER		Sub Iotal	*	0.00	80,000.0
275	22-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00

No.	Tanggal	Keterangan	Frek.	Tarif / Harga (Rp)	Biaya Penjamin (Rp)	Beban Biaya (Tagihan)	
						Tunai (Rp)	Piutang (Rp)
276	23-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
277	24-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
278	25-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
279	26-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
280	27-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
281	27-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
282	28-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
283	28-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
284	29-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
285	29-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
286	30-06-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
287	01-07-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
288	02-07-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
289	: 03-07-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
290	03-07-2020	Visite Dokter Spesialis	1,00	70,000.00	70,000.00	0.00	70,000.00
	Sub Total					0.00	1,120,000.00
9	Paket Kelas Rawat Paket Hak Kelas		0.00	0.00 Tagihan		0.00	14,080,379.77
			0.00	Retur Obat		0.00	277,086.35
			0.00	Total Tagihan		0.00	13,803,293.42
				Plafonase Jaminar			13,803,293.42
				Piutang Jaminan Lainnya			0.00
				lur Bayar / Naik Ke	las	0.00	
				Total Potongan		0.00	
				Piutang Pasien	· · · · · · · · · · · · · · · · · · ·	0.00	
				Pembayaran Uang	Muka	0.00	
				Grand Total Tagiha	ın .	0.00	13,803,293.42
	1				(Pembulatan)	0.00	

Verifikasi Biaya

Terbilang (Tunai)

: Pekalongan, 30-07-2020

Petugas : Dita Oktavianiarti, A.Md

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