

|                             |                     |   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
|-----------------------------|---------------------|---|----------------------------------|-------------------------------------|--------------|--------------|------|---------------|--------|---|-------|-------------------------------|-----------------------------|---|-------|--|-------|---|--|-----|---------|------|-------------------------|--------|-------|---|---------------------|-----|----------------------------------|-------------------------------------|--------|---|---------------------|-----|------------------------------|-------------------------------------|--------|--------------------------|--|--|--|--|---|--|-----|---------|------|---------------------|--------|--------------|-------|---|---------------------|-------|----|----------|--|-----|---|---------------------|-------|--------------------|----------|--|--------|-------------|--|--|--|--|---|---------|
| No.RM                       | :                   | 104521  |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Nama Pasien                 | :                   | MUHAMMAD ABIZAR SANTOSO, AN   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Alamat                      | :                   | PERUM DE` NIRWANA GARDEN BLOK C 15 RT.5 RW.8 SUKANAGARA PURBARATU TASIKMALAYA, TAMBAK SAWAH, WARU, - SIDOARJO   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Jenis Kelamin               | :                   | Laki-Laki   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Tempat & Tanggal Lahir      | :                   | KABUPATEN SIDOARJO 2019-07-04   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Ibu Kandung                 | :                   | -   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Golongan Darah              | :                   | -   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Status Nikah                | :                   | MENIKAH   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Agama                       | :                   | ISLAM   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Pendidikan Terakhir         | :                   | -   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Bahasa Dipakai              | :                   | INDONESIA   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Cacat Fisik                 | :                   | -   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| 1 No.Rawat                  | :                   | 2022/09/12/000042   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| No.Registrasi               | :                   | 006   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Tanggal Registrasi          | :                   | 2022-09-12 08:01:48   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Unit/Poliklinik             | :                   | POLI ANAK   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Dokter Poli                 | :                   | dr. Nurita Alami Dwi Wijayanti.Sp.A   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Cara Bayar                  | :                   | BPJS KESEHATAN  |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Penanggung Jawab            | :                   | MUHAMMAD ABIZAR SANTOSO, AN   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Alamat P.J.                 | :                   | PERUM GRIYA MAPAN SENTOSA BLOK EB IV NO.18 RT.1 RW.5 TAMBAK SAWAH WARU SIDOARJO, TAMBAK SAWAH, WARU, KABUPATEN SIDOARJO   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Hubungan P.J.               | :                   | SAUDARA   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Status                      | :                   | Ralan   |                                  |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Diagnosa/Penyakit/ICD 10    | :                   | <table><tr><td>No.</td><td>Kode</td><td>Nama Penyakit</td><td>Status</td></tr><tr><td>1</td><td>J18.0</td><td>Bronchopneumonia, unspecified</td><td>Ralan</td></tr><tr><td>2</td><td>Z09.8</td><td>Follow-up examination after other treatment for other conditions</td><td>Ralan</td></tr></table>   |                                  |                                     |              | No.          | Kode | Nama Penyakit | Status | 1 | J18.0 | Bronchopneumonia, unspecified | Ralan                       | 2 | Z09.8 | Follow-up examination after other treatment for other conditions | Ralan |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| No.                         | Kode                | Nama Penyakit   | Status                           |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| 1                           | J18.0               | Bronchopneumonia, unspecified   | Ralan                            |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| 2                           | Z09.8               | Follow-up examination after other treatment for other conditions  | Ralan                            |                                     |              |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Biaya & Perawatan           | :                   | <table><tr><td colspan="5">Administrasi</td><td>:</td><td>0</td></tr><tr><td colspan="5">Tindakan Rawat Jalan Dokter</td><td>:</td><td></td></tr><tr><td>No.</td><td>Tanggal</td><td>Kode</td><td>Nama Tindakan/Perawatan</td><td>Dokter</td><td>Biaya</td></tr><tr><td>1</td><td>2022-09-12 08:21:23</td><td>550</td><td>ADMINISTRASI RAWAT JALAN PX LAMA</td><td>dr. Nurita Alami Dwi Wijayanti.Sp.A</td><td>11,000</td></tr><tr><td>2</td><td>2022-09-12 08:21:23</td><td>672</td><td>PEMERIKSAAN/KONSULTASI DR SP</td><td>dr. Nurita Alami Dwi Wijayanti.Sp.A</td><td>50,000</td></tr><tr><td colspan="5">Pemberian Obat/BHP/Alkes</td><td>:</td><td></td></tr><tr><td>No.</td><td>Tanggal</td><td>Kode</td><td>Nama Obat/BHP/Alkes</td><td>Jumlah</td><td>Aturan Pakai</td><td>Biaya</td></tr><tr><td>1</td><td>2022-09-12 13:08:05</td><td>F0492</td><td>R/</td><td>1.0 Biji</td><td></td><td>300</td></tr><tr><td>2</td><td>2022-09-12 13:08:05</td><td>F3674</td><td>APIALYS SYR 100 ML</td><td>1.0 Boto</td><td></td><td>51,300</td></tr><tr><td colspan="5">Total Biaya</td><td>:</td><td>112,600</td></tr></table> |                                  |                                     |              | Administrasi |      |               |        |   | :     | 0                             | Tindakan Rawat Jalan Dokter |   |       |  |       | : |  | No. | Tanggal | Kode | Nama Tindakan/Perawatan | Dokter | Biaya | 1 | 2022-09-12 08:21:23 | 550 | ADMINISTRASI RAWAT JALAN PX LAMA | dr. Nurita Alami Dwi Wijayanti.Sp.A | 11,000 | 2 | 2022-09-12 08:21:23 | 672 | PEMERIKSAAN/KONSULTASI DR SP | dr. Nurita Alami Dwi Wijayanti.Sp.A | 50,000 | Pemberian Obat/BHP/Alkes |  |  |  |  | : |  | No. | Tanggal | Kode | Nama Obat/BHP/Alkes | Jumlah | Aturan Pakai | Biaya | 1 | 2022-09-12 13:08:05 | F0492 | R/ | 1.0 Biji |  | 300 | 2 | 2022-09-12 13:08:05 | F3674 | APIALYS SYR 100 ML | 1.0 Boto |  | 51,300 | Total Biaya |  |  |  |  | : | 112,600 |
| Administrasi                |                     |   |                                  |                                     | :            | 0            |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Tindakan Rawat Jalan Dokter |                     |   |                                  |                                     | :            |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| No.                         | Tanggal             | Kode  | Nama Tindakan/Perawatan          | Dokter                              | Biaya        |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| 1                           | 2022-09-12 08:21:23 | 550   | ADMINISTRASI RAWAT JALAN PX LAMA | dr. Nurita Alami Dwi Wijayanti.Sp.A | 11,000       |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| 2                           | 2022-09-12 08:21:23 | 672   | PEMERIKSAAN/KONSULTASI DR SP     | dr. Nurita Alami Dwi Wijayanti.Sp.A | 50,000       |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Pemberian Obat/BHP/Alkes    |                     |   |                                  |                                     | :            |              |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| No.                         | Tanggal             | Kode  | Nama Obat/BHP/Alkes              | Jumlah                              | Aturan Pakai | Biaya        |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| 1                           | 2022-09-12 13:08:05 | F0492   | R/                               | 1.0 Biji                            |              | 300          |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| 2                           | 2022-09-12 13:08:05 | F3674   | APIALYS SYR 100 ML               | 1.0 Boto                            |              | 51,300       |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |
| Total Biaya                 |                     |   |                                  |                                     | :            | 112,600      |      |               |        |   |       |                               |                             |   |       |  |       |   |  |     |         |      |                         |        |       |   |                     |     |                                  |                                     |        |   |                     |     |                              |                                     |        |                          |  |  |  |  |   |  |     |         |      |                     |        |              |       |   |                     |       |    |          |  |     |   |                     |       |                    |          |  |        |             |  |  |  |  |   |         |