



هوسپتال پوسراوی سنڌ پبليڪ سروسز برآمد
HOSPITAL PUSRAWI SDN BHD (1127571-24)
 (Dimiliki sepenuhnya oleh Majlis Agama Islam Wilayah Persekutuan)



Lot: 149, Jalan Tun Razak, 50400 Kuala Lumpur. Tel: Fax:
 http://www.pusrawi.com.my email: adm@pusrawi.com.my

DETAILS INVOICE
 OUTPATIENT TREATMENT BILL

Payor : NOOR SABRINA BINTI ABD HALIM
 A-13-02 URBAN 360 JLN MAKMUR, TAMAN
 SERI GOMBAK
 68100 BATU CAVES
 SELANGOR

PAGE NO. : 1 of 2
 BILL NO. :
 BILL DATE :
 ADM. DATE : 25/11/2020
 DISCH. DATE :
 PATIENT NO. : 78678
 EPISODE NO. : AEO0691119
 LENGTH OF STAY : 0 Day
 PATIENTS I/C : 910913115674
 GUARANTOR IC :
 STAFF NO. :
 PANEL CODE : CASH
 EXP. DATE :

PATIENT'S NAME : NOOR SABRINA BINTI ABD HALIM
 GUARANTOR :
 HOSPITAL PUSRAWI : JALAN TUN RAZAK
 GILETTER NO. :
 EFFECTIVE DATE :

DESCRIPTION	DATE	QTY	AMOUNT(RM)	x	DISCOUNT	TOTAL(RM)
PDG KECEMASAN	25/11/2020	1.00	30.00		0.00	30.00
Dr Nor Azliah bt Kasah						
DR INHOUSE & NO GST						
PERKHIDMATAN KECEMASAN	25/11/2020	1.00	10.00		0.00	10.00
GENERAL						
URINE FEME	25/11/2020	1.00	15.00		0.00	15.00
LABORATORY						
TRIAGE PROCEDURE	25/11/2020	1.00	10.00		0.00	10.00
NURSING						
ULTRACET 37.5MG TAB	25/11/2020	12.00	28.20		0.00	28.20
DICLOFENAC GEL	25/11/2020	1.00	11.55		0.00	11.55
PHARMACY						
=====						
			104.75		0.00	104.75
=====						
			0.00		0.00	0.00
=====						
			104.75		0.00	104.75
=====						
			0.00		0.00	0.00
=====						
			104.75			104.75
=====						

Collections on behalf of doctors
 Doctor's Charges (Tax invoice is attached)

Sub Total

Please e-mail payment vouchers (PV) / remittance advice to ukk@pusrawi.com.my

YOUR FINAL BILL MAY NOT BE SAME AS THIS STATEMENT
 AS IT MIGHT BE SOME CHARGES NOT SHOWN
 WHILE PROCESSING
 STAFF NAME : HALIMAH BT CHE MAN
 DATE PRINTED : 25/11/2020



هوسپتال پوسراوی سنڌ ڀرین برآمد
HOSPITAL PUSRAWI SDN BHD (112757-0)
 (Dimiliki sepenuhnya oleh Majlis Agama Islam Wilayah Persekutuan)



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DETAILS INVOICE
 OUTPATIENT TREATMENT BILL

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 A-13-02 URBAN 360 JLN MAKMUR, TAMAN
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 68100 BATU CAVES
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PAGE NO. : 2 of 2
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 EPISODE NO. : AE00691119
 LENGTH OF STAY : 0 Day
 PATIENT'S IC : 910913115674
 GUARANTOR IC :
 STAFF NO. :
 PANEL CODE : CASH
 EXPIRE DATE :

PATIENT'S NAME : NOOR SABRINA BINTI ABD HALIM
 GUARANTOR :
 HOSPITAL PUSRAWI : JALAN TUN RAZAK
 GLETTTER NO. :
 EFFECTIVE DATE :

DESCRIPTION	DATE	QTY	AMOUNT(RM)x	DISCOUNT	TOTAL(RM)
AMOUNT NOT COVERED			RM		0.00
TOTAL			RM		104.75
ROUNDING ADJUSTMENT			RM		0.00
TOTAL OUTSTANDING			RM		104.75

HOSPITAL PUSRAWI SDN. BHD.
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