

આઈંડોર કેસ પેપર

સાથે વિષયોત્તર લખવામાં આવેલું છે. આ પેપર
સાથે સંબંધિત દસ્તાવેજો સાથે,
સંબંધિત સંસ્થામાં મોકલવામાં આવે છે.
ડ્રી. પ. પટેલ સર્વિસ

ડૉ. પાલન પટેલ
M.D. (Peds.)
સર્વિસ ટ્રસ્ટી, આઈંડોર કોમ્યુનિટી હોસ્પિટલ
અને, સુરત
E-mail: patelkripal@gmail.com

INDOOR CASE PAPER

Patient Name: **Kaigamsh Bhavsara**

Diagnosis: **Urticaria fever & Hypertensive & Hypertensive crisis**

DOB: **21/04/21** NO: **2710121**

Date	Treatment
21/04/21	I.P.L Torus-Dos E-mucosol Urticaria I-Painful I-Vomiting I-Subacute plus

Complain	Clinical Finding	Remarks
	High grade fever Nausea Vomiting Ab.d. pain Demyelination Lethargic	

Dr. Palan Patel, M.D. (Peds.)
સર્વિસ ટ્રસ્ટી, આઈંડોર કોમ્યુનિટી હોસ્પિટલ
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સંબંધિત સંસ્થામાં મોકલવામાં આવે છે.
સંબંધિત સંસ્થામાં મોકલવામાં આવે છે.

આઈ બાળકોની હોસ્પિટલ
 અને પ્રિવોનેટલ ઈન્ટેન્સિવ કેર યુનિટ
 ડીબી ઈમ્બેલે, કેન્સ ઓસિસેલી સી, અમદાવાદ, ગાંધીવાડી-૩૮૦૦૧૬.
 ફોન : (૦૭૯) ૨૨૭૭૨૧૯૮

ડૉ. રાજેશ પટેલ
 એમ.ડી. (પેડ.)
 અમદાવાદ શિશુ અને બાળકોના સેન્ટર
 ડૉ. રાજેશ પટેલ
 E-mail : patelrajesh@gmail.com

RECEIPT & Final Bill

Pt. Name: Kriyansh Jignesh Bhavsar age: 5.5 month/male No: 1987
 Address: Ahmedabad. DOA: 21/04/2021 DOD: 27/04/2021

Consultation Charge	1 time	500
Room Charge semi *3days	2500rs*3 days	7500
Special room *4days	3500rs*4 days	14,000
Doctor visit Charge	1500rs*2time*7days	7000
TOTAL:	Twenty thousand thousand only	29,000*

Diagnosis: Viral fever with Hyperpyrexia with hyperemesis with dehydration

Date: 27/04/2021



Rajesh Patel
 Dr. Rajesh Patel (M.D., Ped.)
 Anand Children Hospital
 & Neonatal Intensive Care Unit
 B'ph Complex, Opp. Cancer Hospital,
 K. S. Ravia, Ahmedabad-380016

2021.04.30 22:02

આનંદ બાળકોની હોસ્પિટલ
 ડૉ. રણેશ પટેલ
 અમી.કે. (બે.)
 સેન્ટ્રલ ફિગ એમ ઓર્થોડોન્ટીસ્ટ
 શ્રીમતી શોભાલા, સેન્ટ્રલ હોસ્પિટલની સામે,
 અમદાવાદ, અમદાવાદ-૩૮૦૦૧૬
 ઈમેલ : (બે.) રણેશપટેલ@gmail.com

DISCHARGE CARD

Pt name: Kiyansh Jignesh Bhavsar Age: 5 months/male
 Address: Ahmedabad DOD: 27/04/2021
 DOA: 27/04/2021 Wt. on adm.: 6.70kg Wt. on discharge: 5.90kg
 Diagnosis: Viral fever with hyperpyrexia with hyperemesis with dehydration

Pt admitted with G/O with high grade fever with 1 to 2 episode of vomiting with abdo. pain since last two days on admission T:100.5 F, pulse: 118, RR:34 with severe dehydration with lethargic. On discharge no fever, no vomiting, no frequency of stool, patient taking orally well.

Treatment given in ward:

- Inj. RL
- Inj. C.45%DNS
- Inj. mklactm
- syp. lbugesic plus
- Inj. Rantac
- Inj. vomikind
- Inj. monocet

Am	pm	pm	pm	pm	pm
8	12	4	6	8	12

No. : ASB
 : 5282

ANAND MEDICAL STORE

WHSE NO. 8/F, BIPIN COMPLEX, OPP. CANCER GATE NO.8,
 ASARVA, AHMEDABAD. M. 9979525006, 079-22172118
 Customer: KRIYANSH JIGNESH BHAVSAR
 Doctor: RAJESH PATEL

BILL OF SUPPLY CASH MEMO
 SUBJECT TO AHMEDABAD JURISDICTION GSTIN NO. 24APKPP2886N25
 ORIGINAL

Area: AHMEDABAD BI No: C-30
 Mobile: Date: 21/04/2021

Sr	Description	Mfg	Pack	BatchNo	ExpDt	Qty	Rate	GrossAmt	Disc	Amount
1	NEOCAN 24 1PCS	MED	1PCS	182115	11/23	1	100.00	100.00	5.00	95.00
2	RL 500ML DENISH	DEN	500ML	1C91489	02/22	1	47.70	47.70	2.38	45.32
3	DNS 0.45 INJ	DEN	500ML	180301200	05/22	1	155.00	155.00	7.75	147.25
4	MIKACIN INJ. (250MG)	ARI	ZML	BLA200044	12/22	1	41.00	41.00	2.05	38.95
5	IV SET	CHI	1	19F032	05/24	3	50.00	150.00	7.50	142.50
6	DAIR FLOW	CHI	J1217821	09/24	1	250.00	250.00	12.50		237.50
7	RANTAC INJ. 2 ML	J.B	2 ML	64458	08/22	2	3.60	7.20	0.36	6.84
8	VOMKIND VIAL	MAN	10ML	A090315	04/22	2	12.81	25.62	1.28	24.34
9	MONOCEF INJ. (250MG)	ARI	1VIAL	VB17L088	10/22	2	25.94	51.88	2.59	49.29
10	NS 100ML INJ	REA	100ML	R3010428	12/21	2	16.62	33.24	1.67	31.57
11	DISPOVAN 2 ML SYRINGE 1PIC	HIN	1PIC	17D26M820	03/22	5	10.00	50.00	2.50	47.50
12	DISPOVAN NEEDLE (18G-1.5)	HIN	1 peac	47832R	10/23	5	2.50	12.50	0.63	11.87
13	IBUGESIC PLUS SUSPENSION (100ML)	CIP	100ML	J580986	10/21	1	34.10	34.10	1.71	32.39

PLEASE CONSULT YOUR DOCTOR BEFORE USING THE PRESCRIBED MEDICINES.
 DL NO. 20/GJ ADC/111236, 21/GJ ADC/111237.

27 958.24 47.92 1006.16
 OTHER 3.30
 ROUND OFF 10.34
E & C E NET 910.00

Rupees Nine Hundred Ten Only
 Software by VISUAL INFOSOFT PVT. LTD. Customer Care No: 079 - 2794 0399

2021.04.30 22:03

2021.04.30 22:03

ANAND MEDICAL STORE

SHOP NO. 18/F, BIPIN COMPLEX, OPP. CANCER GATE NO. 6,
 ASARVA, AHMEDABAD, M. 9979625006, 079-22172116

Customer: KRISHANSH JIGNESH BHAVSAR
 Doctor: RAJESH PATEL

BILL OF SUPPLY

CASH MEMO

SUBJECT TO AHMEDABAD JURISDICTION. GSTIN NO: 24APKP2566N2;
 ORIGINAL

Area: AHMEDABAD

Bill No: C-31

Mobile: _____ Date: 22/04/2021

Sr	Description	Mfg	Pack	BatchNo	ExpDt	Qty	Rate	GrossAmt	Disc	Amount
1	RL 500ML DENISH	DEN	500ML	1C91489	02/22	1	47.70	47.70	2.38	45.32
2	DNS 0.45 INJ	DEN	500ML	190301200	02/22	1	155.00	155.00	7.75	147.25
3	MGNOCF INJ. (250MG)	ARI	1 VIAL	VB17L088	05/22	2	25.94	51.88	2.59	49.29
4	NS 100ML INJ	REA	100ML	R3010428	12/21	2	16.62	33.24	1.67	31.57
5	IV SET	CHI	1	19F032	05/24	2	50.00	100.00	5.00	95.00
6	VOMIKIND VIAL	MAN	10ML	A090315	04/22	2	12.81	25.62	1.28	24.34
7	RANTAC INJ. 2 ML	J.B	2 ML	64458	08/22	2	3.50	7.00	0.36	6.64
8	DISPOVAN 2 ML SYRINGE 1PIC	HIN	1PIC	17D26M820	03/22	5	10.00	50.00	2.50	47.50
9	DISPOVAN NEEDLE (18G-1.5)	HIN	1 peac	47832R	10/23	5	2.50	12.50	0.53	11.97

PLEASE CONSULT YOUR DOCTOR BEFORE USING THE PRESCRIBED MEDICINES
 DL NO: 20/GJ ADC/111236, 21/GJ ADC/111237

Rupees Four Hundred Fifty Nine Only

Software by VISUAL INFO SOFT PVT. LTD. Customer Care No: 079 - 2754 0399

22 483.14 24.16 459.00
 OTHER -- 0.00
 ROUND OFF 0.00
NET 459.00

E & O E

No. : ASB
: 6282

ANAND MEDICAL STORE

SHOP NO. 8/FF, BIPIN COMPLEX, OPP. CANCER GATE NO.6,
ASARVA, AHMEDABAD, M. 9979625006, 079-22172118.

BILL OF SUPPLY CASH MEMO
SUBJECT TO AHMEDABAD JURISDICTION GSTIN NO: 24APKPP2695N1Z5
ORIGINAL

Customer: KRIYANSH JIGNESH BHAVSAR

Area: AHMEDABAD

Bill No: C-32

Doctor: RAJESH PATEL

Mobile:

Date: 23/04/2021

Sr.	Description	Mfg	Pack	BatchNo	ExpDt	Qty	Rate	GrossAmt	Disc	Amount
1	MONOCEF INJ. (250MG)	ARI	1 VIAL	VB17L088	05/22	2	25.94	51.88	2.59	49.29
2	NS100ML INJ.	REA	100ML	R3010428	12/21	2	16.62	33.24	1.67	31.57
3	MIKACIN INJ. (250MG)	ARI	2ML	BLA200044	12/22	1	41.00	41.00	2.05	38.95
4	DISPOVAN 2 ML SYRINGE 1PIC	HIN	1PIC	17D26M620	03/22	3	10.00	30.00	1.50	28.50
5	DISPOVAN NEEDLE (18G-1.5)	HIN	1 peac	47832R	10/23	3	2.50	7.50	0.38	7.12

PLEASE CONSULT YOUR DOCTOR BEFORE USING THE PRESCRIBED MEDICINES.
DL NO. 20/GJ ADC/111236, 21/GJ ADC/111237

11 163.62 8.17 155.45
OTHER -- 0.00
ROUND OFF 0.45

E. & O. E. NET 155.00

Rupees One Hundred Fifty Five Only
Software by VISUAL INFO SOFT PVT LTD. Customer Care No 079-2754 0399

2021.04.30 22:03

No. : ASB
: 6282

ANAND MEDICAL STORE

SHOP NO. 8/FF, BIPIN COMPLEX, OPP. CANCER GATE NO.6,
SARVA AHMEDABAD. M. 9979625006, 079-22172118
Customer: KRIYANSH JIGNESH BHAVSAR
Doctor: RAJESH PATEL

BILL OF SUPPLY CASH MEMO
SUBJECT TO AHMEDABAD JURISDICTION ORIGINAL GSTIN NO. 24AKPP2896N2Z

Sr	Description	Mfg	Pack	BatchNo	ExpDt	Qty	Rate	GrossAmt	Disc	Amount
1	MONOCEF INJ. (250MG)	ARI	1 VIAL	VB17L088	05/22	2	25.94	51.88	2.59	49.29
2	NS 100ML INJ.	REA	100ML	R3010428	12/21	2	16.62	33.24	1.67	31.57
3	MIKACIN INJ. (250MG)...	ARI	2ML	BLA200044	12/22	1	41.00	41.00	2.05	38.95
4	DISPOVAN 2 ML SYRINGE 1PIC	HIN	1PIC	17D26M820	03/22	3	10.00	30.00	1.50	28.50
5	DISPOVAN NEEDLE (18G-1.5)	HIN	1 peac	47832R	10/23	3	2.50	7.50	0.38	7.13
6	DAIR FLOW	CHI		19A010	12/23	1	250.00	250.00	12.50	237.50

PLEASE CONSULT YOUR DOCTOR BEFORE USING THE PRESCRIBED MEDICINES.
DL NO: 20/GJ ADC/11236, 21/GJ. ADC/11237.

12 413.62 20.68 392.95
OTHER +/- 0.00
ROUND OFF 0.15

Rupees Three Hundred Ninty Three Only

E & O E **NET 393.00**

Software by VISUAL INFOSOFT PVT LTD Customer Care No: 079 - 2754 0399

2021.04.30 22:04