



# LIAQUAT NATIONAL HOSPITAL

Institute for Postgraduate Medical Studies and Health Sciences  
National Stadium Road, Karachi 74800. U.A.N 111 - 456 - 456

## Statement of Patient Bill

Patient Name:	SHERAZ IMAM	Bill No:	<b>P/2022/0536729</b>
Ward:	Neuro Surgery	Case No.	2022/36206
Room/Bed#:	2310	Admission Date:	01-Jul-2022
Created On:	03-July-2022	Discharge Date:	03-Jul-2022

### Hospital Accomodation

Ward	Days	Charges	Description
Neuro Surgery	2 @	Rs.7,800	Rs. 15,600 Nil
		Charges	

### Diagnostic Tests

BSR Test	Rs.	200.00	Nil
Laboratory	Rs.	5,360.00	Nil
Physiotherapy	Rs.	850.00	Nil
X-Ray	Rs.	10,180.00	Nil

### Professional Fees / Procedures

Anaesthetist Fee	Rs.	25,200.00
Surgery	Rs.	63,000.00
Visiting Charges	Rs.	2,700.00

### Pharmacy and Medical / Surgical Supplies

Implant	Rs.	57,488.00	Nil
Medicines & Injections	Rs.	12,480.00	Nil
O.T Item Use	Rs.	414.00	Nil
O.T. Medicines & Injections	Rs.	23,596.00	Nil

### Miscellaneous

Diet Charges	Rs.	1,930.00	Nil
I/v canula	Rs.	200.00	Nil
NCS	Rs.	900.00	Nil
Operation Theatre Charges	Rs.	31,600.00	Nil
Recovery Room + Monitoring Charges	Rs.	3,600.00	Nil

<b>Total Amount</b>	:	Rs.	255,298.00
<b>Less Advance (if any)</b>	:	Rs.	250,000.00
		Rs.	5,298.00

**Due Amount** Rs. 5,298.00

**Amount in Words Rs.** five thousand two hundred ninety-eight only

**DUES CLEARED**  
03 JUL 2022  
Sign: \_\_\_\_\_



**khawaja.fahad**

Prepared By

Received By:

Print Date: Sunday, 3 July, 2022  
Print Time: 6:11:35PM



Cash Payment Receipt

REPORT NO... : BILLING-04

USER..... : FAHAD

TERMINAL ID.: PC2811

DATE..... : 3/07/22

TIME..... : 18:05:42

PAGE NO..... : 0001

CASH COLLECTING LOCATION CODE: 15

LOCATION NAME..... : CASH OFF (MORN)

RECEIPT NO.: 15/2022/0005610

RECEIPT DATE..... : 3-07-2022

Received with thanks a sum of Rs. 5,298.00

(Rupees Five Thousand Two Hundred Ninety Eight Only)

from Case No. 2022/036206

OPD Card No. \_\_\_\_\_

DIRECT NO. \_\_\_\_\_

Patient Name: SHERAZ IMAM

REQUISITION NO.	SERVICE CODE	ITEM NO.	DESCRIPTION	QTY	RATE	AMOUNT	DOSAGE/ R.C.Date
0000/000000			FINAL PAYMENT OF BILL NO: 0000536729			5,298.00	
TOTAL:						5,298.00	



Prepared by \_\_\_\_\_

For Liaquat National Hospital

**PHARMACIST MAY SUBSTITUTE PRESCRIBED BRAND WITH SAME GENERIC  
 IF NOT PART OF LNH FORMULARY**



**Liaquat National Hospital**  
Stadium Road, Karachi - 74800, Pakistan

57  
0

Receipt

User: shehzad.hussain  
Terminal: pc-1904.lnh.org  
Print Date: 06-07-2022  
Print Time: 11:02 AM

Location: SWASC Main Reception  
Receipt No: C220598070  
Received with thanks a sum of Rs.750.00  
Rupees Seven Hundred And Fifty only.  
OPD No.: 0220532545  
Patient MRN: ABS-215-0322  
Patient Name: SHERAZ IMAM  
Consultant: Salman Yousuf Sharif

Receipt Date: 06-07-2022  
Entry User: shehzad.hussain  
Patient Age: 43Y (Male)  
Patient Contact: 03132209500  
OPD Name.: NEURO SURGERY CLINIC

Requisition	Code	Description	Qty.	Unit Price	Amount (PKR)
R220933436	-	Consultation Fee	1	750.00	750.00
Net Payable (Rounded off):					750.00
Amount Paid (Cash):					750.00



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**IF NOT PART OF LNH FORMULARY**

Prepared By:

For Liaquat National Hospital



**Liaquat National Hospital**  
Stadium Road, Karachi 74800, Pakistan

83 S - 1415 - 22  
2

Receipt

Location: SWASC Main Reception  
 Receipt No: C220772730  
 Received with thanks a sum of Rs.750.00  
 Rupees Seven Hundred And Fifty only.  
 OPD No.: 0220813763  
 Patient MRN: ASS-215-0322  
 Patient Name: SHERAZ IMAM  
 Consultant: Salman Yousef Sharif

User: erum.fatima  
 Terminal: pc-1668.lnh.org  
 Print Date: 05-09-2022  
 Print Time: 11:36 AM

Receipt Date: 05-09-2022

Entry User: erum.fatima  
 Patient Age: 42Y (Male)  
 Patient Contact:03132289500  
 OPD Name.: NEURO SURGERY CLINIC

Requisition	Code	Description	Qty.	Unit Price	Amount(PKR)
R221228757	-	Consultation Fee	1	750.00	750.00
Net Payable (Rounded off):					750.00
Amount Paid (Cash):					750.00



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Prepared by:

For Liaquat National Hospital



**Liaquat National Hospital**  
Stadium Road, Karachi - 74800, Pakistan

58/6

5-1413-22

User: fawwad.ansari  
Terminal: pc-0433.lnh.org  
Print Date: 06-05-2022  
Print Time: 12:01 PM

Receipt Date: 06-05-2022

Location: SWASC Main Reception  
Receipt No: 0220392976  
Received with thanks a sum of Rs.590.00  
Rupees Five Hundred And Ninety only.  
IO No.: 0220420140  
Patient MRN: 885-215-0322  
Patient Name: SHERAZ IMAM  
Consultant: Salman Yousef Sharif

Entry User: fawwad.ansari  
Patient Age: 42Y (Male)  
Patient Contact: 03132289500  
OPD Name.: NEURO SURGERY CLINIC

Requisition	Code	Description	Qty.	Unit Price	Amount(PKR)
0611901	-	Consultation Fee	1	590.00	590.00
Net Payable (Rounded off):					590.00
Amount Paid (Cash):					590.00

*(Handwritten signature)*  
Liaquat National Hospital  
CASH RECEIPT  
Sign

Prepared By:

For Liaquat National Hospital

**PHARMACIST MAY SUBSTITUTE PRESCRIBED BRAND WITH SAME GENERIC  
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**Liaquat National Hospital**  
 Stadium Road, Karachi - 74800, Pakistan

12

User: komal.komal  
 Terminal: pc-1907.lnh.org  
 Print Date: 20-04-2022  
 Print Time: 8:26 AM  
 Receipt Date: 20-04-2022

Location: SWASC Main Reception  
 Receipt No: C220364440  
 Received with thanks a sum of Rs.590.00  
 Rupees Five Hundred And Ninety only.  
 OPD No.: U220390439  
 Patient MRN: A85-215-0322  
 Patient Name: SHERAZ IMAM  
 Consultant: Salman Yousef Sharif

Entry User: komal.komal  
 Patient Age: 42Y (Male)  
 Patient Contact: 03132289500  
 OPD Name.: NEURO SURGERY CLINIC

Requisition	Code	Description	Qty.	Unit Price	Amount(PKF)
R220566295	-	Consultation Fee	1	590.00	590.00
Net Payable (Rounded off):					590.00
Amount Paid (Cash):					590.00



Prepared By:

For Liaquat National Hospital

**PHARMACIST MAY SUBSTITUTE PRESCRIBED BRAND WITH SAME GENERIC  
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Sign/Name of Pharmacist:



**Liaquat National Hospital**  
Stadium Road, Karachi - 74800, Pakistan

Sign/Name of Consultant...

*Handwritten signature*

Receipt

Location: SWASC Main Reception  
Receipt No: C220258310  
Received with thanks a sum of Rs.800.00  
Rupees Eight Hundred only.

User: adnan.muhammad  
Terminal: oc-1907.lnh.org  
Print Date: 15-03-2022  
Print Time: 5:30 PM  
Receipt Date: 15-03-2022

OPD No.: 0220277812  
Patient MRN: ABS-215-0322  
Patient Name: SHERAZ IMAM  
Consultant: Muhammad Imran

Entry User: adnan.muhammad  
Patient Age: 42Y (Male)  
Patient Contact: 03023893361  
OPD Name: NEURO SURGERY CLINIC

Requisition	Code	Description	Qty.	Unit Price	Amount(PKR)
R220396257	-	Consultation Fee	1	800.00	800.00
Net Payable (Rounded off):					800.00
Amount Paid (Cash):					800.00



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DOW Diagnostic Research and  
Reference Laboratory

Dow University Of Health Sciences

Invoice

ORIGINAL

MR No 220531-114294864  
Password 704840  
Name SIHERAZ IMAM  
Age/Gen 43Y/Male  
Mobile No 03132289500  
Inv No 118737731  
Inv Date 31-May-2022 05:06 PM  
Inv By zubair ahmed  
Remarks  
Transaction  
Type

S#	Description	Price
1	CP (COMPLETE BLOOD PICTURE) Accession No: 1120780981 Section No: H12200338260 Report Date: 01-Jun-2022 07:00 PM	450
2	HBSAG Accession No: 1120780980 Section No: CLP2201372623 Report Date: 01-Jun-2022 07:00 PM	900
3	HEPATITIS C ANTIBODY Accession No: 1120780979 Section No: CLP2201372623 Report Date: 01-Jun-2022 07:00 PM	1,150
4	SGPT Accession No: 1120780978 Section No: CLP2201372621 Report Date: 01-Jun-2022 07:00 PM	230
5	B-12 (VITAMIN B-12) Accession No: 1120780977 Section No: CLP2201372620 Report Date: 01-Jun-2022 07:00 PM	1,000
6	FOLIC ACID Accession No: 1120780976 Section No: CLP2201372619 Report Date: 01-Jun-2022 07:00 PM	900
Total Amount		4,630
Paid Amount		5,000
Return Amount		370
Balance		0

Printed By zubair ahmed(8213)

Terminal Counter 1

Printed On 31-May-2022 05:06 PM





Invoice  
**ORIGINAL**

MR No 220531-114294864  
 Password 704840  
 Name SHERAZ IMAM  
 Age/Gen 43Y/Male  
 Mobil: No 3132289600  
 Inv No 118909331  
 Inv Date 15-Jun-2022 01:24 PM  
 Inv By Fulsom Asif  
 Remarks platelete manual count  
 Transaction Cash  
 Type

S#	Description	Price
1	1. TUBERCLE BACTER FYLOR, SUTGEN Accession No: 1121210472 Section No: MOL2200254611 Report Date: 16-Jun-2022 07:00 PM	1,650
2	2. ANA PROFILE (ANA,AMA,ASMA) Accession No: 1121210469 Section No: MOL220021004 Report Date: 20-Jun-2022 07:00 PM	2,500
3	3. SERUM ISE Accession No: 1121210467 Section No: CLR2201531398 Report Date: 16-Jun-2022 07:00 PM	550
4	4. PLATELET COUNT Accession No: 1121210462 Section No: HEM2200378370 Report Date: 16-Jun-2022 07:00 PM	230
Total Amount		4,930
Paid Amount		5,000
Return Amount		70
Balance		0

Printed By Fulsom Asif(6286)  
 Terminal Counter 1  
 Printed On 15-Jun-2022 01:24 PM



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**PATIENT**  
A Project of PATEL FOUNDATION

ST-18, Block-1, Gulshan-e-Iqbal, Karachi.  
Ph: 021-3490999, Fax: 3490999, Email: info@patel-hospital.org.pk  
Website: patel-hospital.org.pk

**PATIENT**

Printing Date & Time: 16/05/2022 17:48:51 PM

Receipt No: 012159736 Date: 16 MAY 22

Type: CONSULTANT CLINIC

M.R.#: 10-11-00-98-10 (33-48-25)

Name: M. SHERAZ IMAM S/O IMAM  
MUMIN

Consultant: DR. FAHIM B. KHAN

Gender: Male Age: 43 Year

Coverage: PRIVATE

Payment: CASH

Company: \_\_\_\_\_  
Emp. No: \_\_\_\_\_

Issued By: (PH11146) MUHAMMAD BILAL

S#	Description	Amount
1	CONSULTANT FEES	750.00
	CONSULTANT CHARGES	100.00
	CONSULTATION	0.00
	Total:	850.00
	Credit Card:	0.00
	Net Amount:	850.00
	Paid Amount:	850.00
	Balance:	0.00

Amount in Word - Rupees Eight Hundred  
Fifty Only

Receipt No: 40

Issue Date: 16-MAY-22

Issue Time: 19:57:00

# The Pharmacy Services

Emergency

ST-18 Block 4 Gulshan-e-Iqbal, Karachi.

For Home Delivery Whatsapp (0300-0519823,  
0333-8155536)

Our Website: [www.thopharmacyservices.com](http://www.thopharmacyservices.com)

Email: [pharmacyservices19@gmail.com](mailto:pharmacyservices19@gmail.com)

For Complain & Suggestion Whatsapp  
(0321-8200137)

## Original Bill

Shift : DAY  
Invoice No. ER-1001576 Date: 17-May-2022  
Mop: 16 15.32  
Customer : 31900  
User : SAKHETI RAN  
POS : CDC-PC

Pack / Unit	Pack Price	Discount	Total
DECADRON INJ 4MG (100) (009338)			
0 2	580.00	4.18	12.22
STOPPER IV(010195)			
1 0	0.00	0.90	9.10
CANNULA IV NIPRO 2% (018519)			
1 0	160.00	9.60	150.40
10CC SYRINGE DISPOSIBLE AMSON(023580)			
1 0	30.00	3.60	30.40

Cross Total : 256.40

Discount : 18.28

Bill Total : 238.00

Cash Received : 0 Refund : 0

Only Medicines with Valid Receipt will be Returned.

Exchanged With In Two (2) Days.

Products which will not be Refundable are:

(1) Refrigerated Medicines (2) Sterilized Medicines

(3) Medicines not in Market (4) Combination

(5) Medicines Intact (6) Original Package all medicines if  
their Purchase is by the Health Care Appliances.

Refund Timing :

Monday To Saturday From 09:00 AM To 07:00 PM



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