



|                  |   |                        |                   |   |                         |
|------------------|---|------------------------|-------------------|---|-------------------------|
| Kode Rumah Sakit | : | 3317027                | Kelas Rumah Sakit | : | C                       |
| Nama RS          | : | RS BHINA BHAKTI HUSADA | Jenis Tarif       | : | TARIF RS KELAS C SWASTA |

|                   |   |               |                 |   |                             |
|-------------------|---|---------------|-----------------|---|-----------------------------|
| Nomor Peserta     | : | 0000419412058 | Nomor SEP       | : | 0157R0040124V005145         |
| Nomor Rekam Medis | : | 24041472      | Tanggal Masuk   | : | 29/01/2024                  |
| Umur Tahun        | : | 17            | Tanggal Keluar  | : | 01/02/2024                  |
| Umur Hari         | : | 6367          | Jenis Perawatan | : | 1 - Rawat Inap              |
| Tanggal Lahir     | : | 24/08/2006    | Cara Pulang     | : | 1 - Atas Persetujuan Dokter |
| Jenis Kelamin     | : | 2 - Perempuan | LOS             | : | 4 hari                      |
| Kelas Perawatan   | : | 3 - Kelas 3   | Berat Lahir     | : | -                           |

Diagnosa Utama : O00.8 Other ectopic pregnancy

Diagnosa Sekunder : -

|          |   |       |                                                                               |
|----------|---|-------|-------------------------------------------------------------------------------|
| Prosedur | : | 90.59 | Microscopic examination of blood, Other microscopic examination               |
|          | : | 96.71 | Continuous invasive mechanical ventilation for less than 96 consecutive hours |

|               |   |   |             |   |   |
|---------------|---|---|-------------|---|---|
| ADL Sub Acute | : | - | ADL Chronic | : | - |
|---------------|---|---|-------------|---|---|

### Hasil Grouping

|             |   |          |                                                  |    |               |
|-------------|---|----------|--------------------------------------------------|----|---------------|
| INA-CBG     | : | J-1-20-I | PROSEDUR SISTEM PERNAFASAN NON-KOMPLEKS (RINGAN) | Rp | 16,000,400.00 |
| Sub Acute   | : | -        | -                                                | Rp | 0.00          |
| Chronic     | : | -        | -                                                | Rp | 0.00          |
| Special CMG | : | -        | -                                                | Rp | 0.00          |

|             |   |  |    |               |
|-------------|---|--|----|---------------|
| Total Tarif | : |  | Rp | 16,000,400.00 |
|-------------|---|--|----|---------------|