

Warm Greetings Sir

EMERGENCY MEDICAL ATTENTION OF BROTHER JOSEPH INYAMA

Brother Joseph Inyama was admitted in the morning (31st of May) in Beachland hospital (Arepo) and transferred to REDEEMED HEALTH CENTER Saturday night (1st of June) by beachland hospital who was immediately placed on Oxygen, his pulse rate was reading 169, Sbo2 100+ when we arrived, below are immediate medication he was placed under and subsequent medication and colleagues personal funds spent.

OXYGEN Started, followed by other injections and etc... He was discharged Tuesday 4th of June with his pulse rate at 102 and sbo2 at 95 and other test were carried out to ensure he is stable for movement on its own

TOTAL COST = N258,750 (exclusive of his feedings) **RECEIPTS ATTACHED BELOW**

description	amount	
dextrose saline amoksiklav artesunate 120MG INJ. PCM INJ. IPRATROPIUM NEBULISER NEBULISER 5MG	N29,850	REDEEMED HEALTH CENTER
A&E = 12,500 UTILITY = 3,000 CONSUMABLES = 21,000 OXYGEN = 10,000 PHARMACY = 2,200+9,300	N58,000	REDEEMED HEALTH CENTER
X-RAY	N10,000	REDEEMED HEALTH CENTER
ECG-CARDIO	N10,000	REDEEMED HEALTH CENTER
LABORATORY TEST	N30,000	REDEEMED HEALTH CENTER
3 OXYGEN OF N25,000 EACH	N75,000	REDEEMED HEALTH CENTER
OUT-PATIENT	N5,000	REDEEMED HEALTH CENTER
LAB TEST	N11,000	REDEEMED HEALTH CENTER
	N217,850	N217,850
ACCOM 3000, DRUGS 33900, PROF 4,000	N20,900	Beachland
	N20,000	Beachland
	N40,900	N40,900
Grand Total		N258,750

Redeemer's Health Centre
 Pharmacy Department
 PHONE: 08060996417, 0129185

Time Stamp: 01/06/2024, 23:52:05
 INVOICE # ED0050698
 Hospital ID # 64485
 Served by: ADAMS OLUFEMI

Qty	Drug Name	Unit	Amount
1	DEXTROSE SALINE 5% IV	900	900
2	AMOKSIKLAV 1.2G INJ	3,450	6,900
6	ARTESUNATE 120MG INJ	2,300	13,800
3	PCM INJ	600	1,800

Subtotal
 Grand Total #23,400.00

Thank you.
 Note: Goods purchased cannot be returned
 Work hour: 24 hours

Redeemer's Health Centre
 Pharmacy Department
 PHONE: 08060996417, 0129185

Time Stamp: 02/06/2024, 06:16:56
 INVOICE # ED0050710
 Hospital ID # 64485
 Served by: ADAMS OLUFEMI

Qty	Drug Name	Unit	Amount
1	IPRATROPIUM NEBULISER	1,000	1,000
1	NEBULIZE 5MG	1,200	1,200

Subtotal *800*
 Grand Total #2,200.00

Thank you. *3,000*
 Note: Goods purchased cannot be returned
 Work hour: 24 hours

Redeemer's Health Centre
 Pharmacy Department
 PHONE: 08060996417, 0129185

Time Stamp: 02/06/2024, 20:49:08
 INVOICE # ED0050796
 Hospital ID # 64485
 Served by: OLU-AFOLAYAN OLUWANIFEMI

Qty	Drug Name	Unit	Amount
1	AMOKSIKLAV 1.2G INJ	3,450	3,450

Subtotal
 Grand Total #3,450.00

Thank you.
 Note: Goods purchased cannot be returned
 Work hour: 24 hours

REDEEMER'S HEALTH CENTER
 Redemption Camp, Ogun State
 08060996417 08033235353

Patient Hosp. ID: 64485
 Received from:
 INYAMA JOSEPH
 Receipt No: RHC405037
 Date: 02-06-2024 12:43:11 PM
 Payment type: POS
 Printed today: 02-06-2024
 Issued by: OWUSU CHIOMA

Being payment for	Amount Paid
OXYGEN	25,000

₦ 25,000.00 K

Amounts in words:
 Twenty Five Thousand Naira
 Money paid not refundable
 T-Code: WLT4070376G7965H IMAOW2024
 Motto: I am the Lord that healeth thee

REDEEMER'S HEALTH CENTER
 Redemption Camp, Ogun State
 08060996417 08033235353

OFFICIAL RECEIPT

Patient Hosp. ID: 64485
 Received from:
INYAMA JOSEPH
 Receipt No: **RHC404976**
 Date: **01-06-2024 11:51:20 PM**
 Payment type: **POS**
 Printed today: **01-06-2024**
 Issued by: **AKINMOYO OPEYEMI**

Being payment for	Amount Paid
LABORATORY TEST	11,000
OXYGEN	25,000

₦ 36,000.00 K

Amounts in words:
 Thirty Six Thousand Naira

Money paid not refundable
 T-Code: WLT4069766J-K78LMMIAK2024
 Motto: I am the Lord that healeth thee

REDEEMER'S HEALTH CENTER
 Redemption Camp, Ogun State
 08060996417 08033235353

OFFICIAL RECEIPT

Patient Hosp. ID: 64485
 Received from:
JOSEPH
 Receipt No: **RHC404970**
 Date: **01-06-2024 10:40:33 PM**
 Payment type: **TRANSFER**
 Printed today: **01-06-2024**
 Issued by: **AKINMOYO OPEYEMI**

Being payment for	Amount Paid
OUT-PATIENT	5,000

₦ 5,000.00 K

Amounts in words:
 Five Thousand Naira

Money paid not refundable
 T-Code: WLT4069706 F5G7965MIAK2024
 Motto: I am the Lord that healeth thee



BEACHLAND SPECIALIST HOSPITAL

Plot 16, Al-Firdaus Estate, Off Lagos-Ibadan Expressway,
Arepo, Ogun State
Tel: 01-8904460, 07067063941, 08033000347

MOTTO: SERVICE TO GOD AND HUMANITY

Hospital Reg. No: _____

Staff Employment No: _____

Date of Admission: 16/2024

Date of Discharge: 16/2024

Name of Patient: Inyemah Joseph

Name of Staff: _____

Staff Branch: _____ Dept: Account

Date: 16/2024

HOSPITAL BILL

DIAGNOSIS	₦	K
1. Registration		
2. Maintenance and Accommodation (days at Naira)	3,000	00
3. Tablets	7	
4. Syrups		
5. Injections		
6. IV Fluids		
7. Blood		
8. Operation Charges		
9. Anaesthesia		
10. Delivery		
11. Xray Charges		
12. Laboratory Charges		
13. Professional Services	4,000	00
14. Ultrasound Services		
15. Incubator Care		
16. Others		
TOTAL	40,900	00
Deduct: DEPOSIT	20,000	00
BALANCE	20,900	00

The sum of Twenty thousand nine hundred Naira
Naira only Kobo

Signature of Staff/Patient

For: BEACHLAND SPECIALIST HOSPITAL

REDEEMER'S HEALTH CENTER
Redemption Camp, Ogun State
08060996417 08033235353

Patient Hosp. ID: 64485
Received from:
INYAMA JOSEPH
Receipt No: RHC405855
Date: 04-06-2024 5:39:35 PM
Payment type: POS
Printed today: 04-06-2024
Issued by: OGINNI KEHINDE

Being payment for	Amount Paid
A&E	12,500
UTILITY	19,000
CONSUMABLES	21,000
OXYGEN	10,000
PHARMACY	2,200

₦ 48,700.00 K

Amounts in words:
Forty Eight Thousand; Seven Hundred Naira
Money paid not refundable
T-Code: WLT4078556&@\$1A+B8DEOG2024
Motto: I am the Lord that healeth thee

REDEEMER'S HEALTH CENTER
Redemption Camp, Ogun State
08060996417 08033235353

Patient Hosp. ID: 64485
Received from:
INYAMA JOSEPH
Receipt No: RHC405323
Date: 03-06-2024 12:04:14 PM
Payment type: POS
Printed today: 03-06-2024
Issued by: JEMI QUEEN

Being payment for	Amount Paid
PHARMACY	9,300

₦ 9,300.00 K

Amounts in words:
Nine Thousand; Three Hundred Naira
Money paid not refundable
T-Code: WLT4073236C5H\$6D5)ENJE2024
Motto: I am the Lord that healeth thee

REDEEMER'S HEALTH CENTER
Redemption Camp, Ogun State
08060996417 08033235353

Patient Hosp. ID: 64485
Received from:
INYAMA JOSEPH
Receipt No: RHC405366
Date: 03-06-2024 1:25:45 PM
Payment type: POS
Printed today: 03-06-2024
Issued by: OWUSU CHIOMA

Being payment for	Amount Paid
X-RAY	10,000

₦ 10,000.00 K

Amounts in words:
Ten Thousand Naira
Money paid not refundable
T-Code: WLT4073666/DJ9G2#7MAOW2024
Motto: I am the Lord that healeth thee

REDEEMER'S HEALTH CENTER
Redemption Camp, Ogun State
08060996417 08033235353

Patient Hosp. ID: 64485
Received from:
INYAMA JOSEPH
Receipt No: RHC405282
Date: 03-06-2024 11:05:19 AM
Payment type: POS
Printed today: 03-06-2024
Issued by: OWUSU CHIOMA

Being payment for	Amount Paid
ECG-CARDIO	10,000

₦ 10,000.00 K

Amounts in words:
Ten Thousand Naira
Money paid not refundable
T-Code: WLT4072826A+B87C5HMAOW2024
Motto: I am the Lord that healeth thee

REDEEMER'S HEALTH CENTER

Redemption Camp, Ogun State
08060996417 08033235353

OFFICIAL RECEIPT

Patient Hosp. ID: 64485

Received from:

INYAMA JOSEPH

Receipt No: **RHC405531**

Date: **04-06-2024 7:02:12 AM**

Payment type: **POS**

Printed today: **04-06-2024**

Issued by: **EMMANUEL RUTH**

Being payment for	Amount Paid
LABORATORY TEST	30,000

₦ 30,000.00 K

Amounts in words:
Thirty Thousand Naira

Money paid not refundable

T-Code: WLT407531634&@!A+THEM2024

Motto: *I am the Lord that healeth thee*

**Redeemer's Health Centre
Pharmacy Department**

PHONE: 08060996417, 0129185

Time Stamp: 03/06/2024, 11:56:46

INVOICE # ED0050886

Hospital ID # 64485

Served by: OLUFEMI HANNAH

Qty	Drug Name	Unit	Amount
3	G-CLAV 1.2 INJ	2,900	8,700
2	GENTAMICIN INJ	300	600

Subtotal

Grand Total **#9,300.00**

Thank you.

Note: Goods purchased cannot be returned

Work hour: 24 hours