

# Saral Doctor Management

Presented By

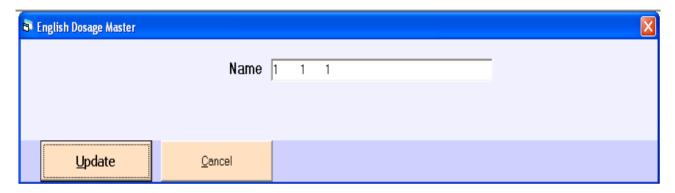
# Deep Solutions

B/2, Mahalaxi Center, Rambaug Cross Road, Jagabhai Park, Maninagar, Ahmedabad-380 008 (M): 9898053777, 7383315626, 9904554232

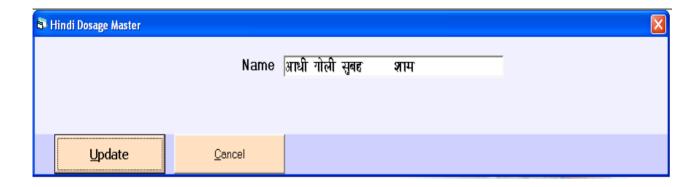
### Masters :- Patient Masters

Patient Master  Code  Group Code	A02101 Name Baldev M. Parmar  85 SUNDRY DEBTORS
Opening Bal.	Group SUNDRY DEBTORS  O Sex M
Occupation Address	BAnk managar Ref By self B/82 Mayarohidas soc.
Area	Ishanpur Pin
City Admit Date	Ahmadabad Phone No 25716490  24/Nov/2015
<u>Update</u>	Cancel

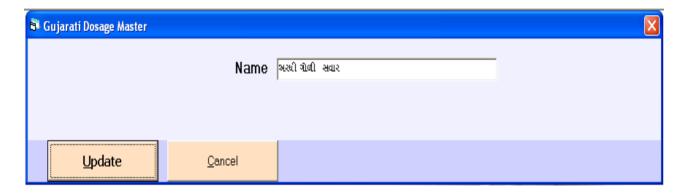
# Dosage English



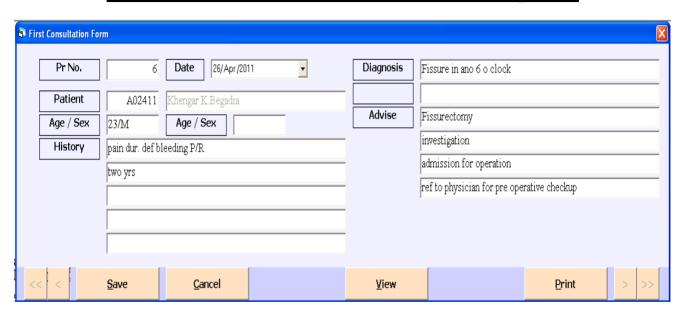
# Dosage Hindi



# Dosage Gujarati



### Transaction: First Consultation Reports



# First Diagnosis

No	Name	D	ate	Ref By :	Age		Sex			
1100.00					Occu.					
Pain	Bled	ding Swe	elling / Hardness /	Boil at Perianal Regio	ns	Discharge			Address	
Prolapes	Bowel	Habbit Fr	equency	H/O Past Illeness :	Pain		Ble	eeding		
					Loc	al Trauma				
Boil of Abcess Per	ial Region Colitis			Recent Delive	ery					
Drug Allergy	Nature	of Work D	Dietary Habit	Intoxication	ıs					
Family History	Associa	te Dis.	Treatement	Pre Treatme	nt	O/E	B.P.	Pulse	Temp.	Wt.
Local Exam	ļ	Proctoscopic Exam	n : Position (O'clocl	 k)			Lab.Inv. : (	BC,RBC,HIV	,Urine, R M	
issure / Haemorrho	oids / Sentinal tag		Fistula / Absce	ess						
(-Ray Chest		Fistulogram		Tratment A	idv.					

# **Predifined Priciption**

Pr No. 1	Patient A	00003 Pappu yadav		Date 23/ Jul /2009	~
Inj. Avil.	0	Inj. Phenergan	6	Disposable Needle No.	4
Inj. Atropine Sulphate	0	Inj. Pentothal Sodium	0	Disposable Cap/Mask	0
Inj. Ampilox / Sulbacin	0	Inj. Perinorm Emeset	2	Disposable Glove No.	6
Inj. Aminophyllin / Adrenalin / Deriphyllin	34	Inj. Ranitidine	2	Hydrogen Peroxide	4
Inj. Botropase	0	Inj. Ringer Lactate	4	Jelco No. 18-19-20	0
Inj. Butrum	34	Inj. Soda-bi-Carb	0	J and J Adhesive Tape	0
Inj. Garamycin	4	Inj. Tramadol	5	Micropore Adhesive Tape	2
Inj. Calcium Gluconatic With Vit. C	0	Inj. Tetanus Toxide	4	Procto Clysis Enema	4
Inj. Ciplox / Oflox / Levoflox	0	Inj. Tidigesic / Fortwin	3	Rubber Cathater No.	0
Inj. Dopram / Restimulen	0	Inj. Valium / Anxol	0	Surgical Cotton	0
Inj. Dextrose 10% / 5% / 25%	5	Inj. Voveran / Dicloran	0	Surgical Gauze	0
Inj. Dextrose / Efcorlin	34	Inj. Xylocaine 5%	1	Sterillium	4
Inj. Dopamine / Ephedrine /	0	Inj. Xylocain 2% c Adrenalin	34	Sterile L.P. Needle No.	0
Mephentin Inj. Ketmex	0	Aro/JmsSet. 1450/2450	0	Scalp Vain Set No.	0
Inj. Lasix	1	AHD 2000	4	Water For Injection	12
Inj. Metrogyl	0	Betadine / Wockadine Solution	0	Xylocaine Jelly 2%	1
Inj. Midazolam / Fulsed	4	Catqut	2 Xylocaine Topical 4%		0
Inj. Normal Saline	5	Disposable Syringe	2	#	

# Outdoor / Indoor Case

Patient	t A			21/Apr/20							
Cotos		04316	Ankitabhai V Th	iakor				Morn/Even	1		
Cated	gory M	edical				Sub Category	Enteric Fever				
Compla	ains 🗀					Treatment					
AGE	17	SEX	М	wt [		ВР	Pulse	, [	Temp		
	Туре		Prescription			DOSE-GUJ	1	DOSE-HIN		DOSE-ENG	QTY
Cap	)	Enuff			સવાર	સાજ	सुबह	शाम	:		6
Cap		Enuff		S <sup>1</sup>	var	saj	subh	xam			6
Tab		Rantac		S	var	saj	subh	xam			6
Tab		Zenflox OZ		S	var	saj	subh	xam			6
Tab		Sporlac DS		S	var	saj	subh	xam			6

# Bill (Invoice Print)

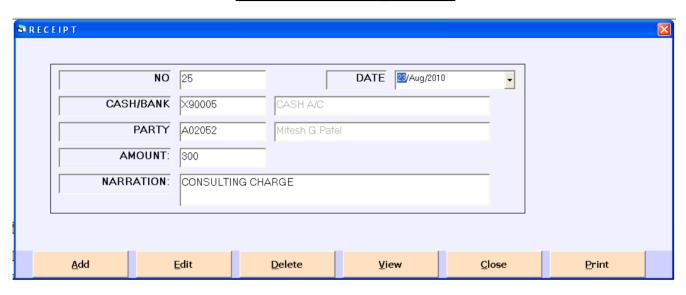
Τħ	VN	 ~1	_
	NЮ	 - 11	 _

Bill No.	2	Date	18/Sep/2005	Da	ite Of Admission	17/Sep/2005
Name	<u>P. B. 1</u>	<u>Mishra</u>		Da	te Of Discharge	18/Sep/2005
Charges			NO	8	RATE:	AMOUNT
Consultat	ion Charge			1	150	150.00
Operation	Theater C	harge		1	500	500.00
Operation	Charge			1	8000	8000.00
Dressing (	Charge		2	0	50	1000.00
Bed Charg	ge			1	200	200.00
Round Ch				2	100	200.00
Nursing C	-			1	75	75.00
	-		Total	Amo	unt	10125.00
			Advar	ice F	Paid	2000.00
			Net A	mou	nt	8125.00

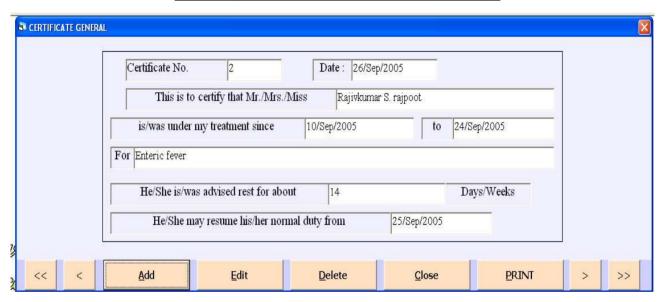
# Receipt / Payment



### Income / Expense



### **Certificate:** General Entry



# **General Print**

DT: 25/9/2005

### To Whom So Ever It May Concern

Mr./Mrs./Miss. Bhavin Z. Bharwad

is/was under my treatment since 21/9/2005 to 22/9/2005

for fever

He/She is/was advised to take rest for about Days / Weeks

He/She will be fit to resume his/her normal duty from 23/9/2005

### **Leave**

DT: 11/Sep/2006

### LEAVE CERTIFICATE

This is to certify that Miss Champaben B. dodiar

under my treatment for 40%Burns

from dt. 05/Sep/2006

She requires complete bed rest from

05/Sep/2006 to 05/Oct/2006

# Leave Extension Certificate

DT: 11/Sep/2006

### LEAVE CERTIFICATE

This is to certify that Miss Champaben B. dodiar

 $_{
m S}$  under my treatment for 40% Burns

from dt. 05/Sep/2006

She requires complete bed rest from

05/Sep/2006 to 05/Oct/2006

### Fitness Certificate

DT: 11/Sep/2006

### LEAVE CERTIFICATE

This is to certify that Miss Champaben B. dodiar

under my treatment for 40%Burns

from dt. 05/Sep/2006

She requires complete bed rest from

05/Sep/2006 to 05/Oct/2006

#### Certificate No. 2

#### Date: 15/Oct/2007

### **INJURY CERTIFICATE**

This is to certify that Mrs. Arunaben Mukeshbhai Patel aged 30 residing at Navivasahat Jasodanagar
was admitted to my hospital as indoor patient on 23/Sep/2007
Time 5pm (PM) without Police Yadi.

She has sustained following injuries due to

#### Burns

Patient Was Brought By Mukeshbhai Patel within the area of Vatva GIDC Police Station.

History Narrated By:

Alleged History Of: Arunaben Mukeshbhai Patel

#### Vital data

		= <u>-</u>
Pulse	B.P.	Consciousness
108	110/70	Burns

#### On Examination

First/second degree burns on cheast & both hands due to caroceen. Smell of carceen was present.

### Injury Certificate

### Admission / Discharge

DT: 30/Sep/2005

### ADMISSION / DISCHARGE

This is to certify that Mr. P.B. Mishra

was admitted to my hospital on 17/Sep/2005 Time: 8AM

for Fistula

He was given discharge on 18/Sep/2005 Time: 8PM

He remained hospitalised for 2 Days

### **Birth Certificate**

1

#### **BIRTH CERTIFICATE**

DATE 04/Jun/2004

CERTIFICATE NO

PATIENT NAME Kariben Bharvad

HUSBAND'S NAME Kanabhai bharvad

RESIDENCE Della Tal - Kadi.

PERSONAL HISTORY Anaemic

DATE OF ADMISSIION 04/Jun/2004

DATE OF DELIVERY 04/Jun/2004

DELIVERY TYPE 4th Para Normal delivery

BABY One Male Baby

WEIGHT 3.00 Kg.

HEALTH OF BABY Healthy

HEALTH OF PATIENT Good

# Reference Letter

		Date.
	REFERENC	<u>E LETTER</u>
My De	ar Dr.	
Hello		
H	lope this chit will find you in b	est of your spirit.
Iaa	n referring a patient	
aged	for his illness of	
for		
And Rep	ort Me.	
		Thanking You
		Sincerely Your's

### Thanks Letter

DT:

#### LETTER OF THANKS

### Dear

Thanks for sending the patient

has

requires to get following investigations

And Requires To Come For Next Consultation On.

# **Discharge Summary**

#### DISCHARGE SUMMARY

Patient Name	Jabbar N.Shah		
Age / Sex	30/M	Indoor No	146
Diagnosys	Appendicitis		
Date of Admission	20/Jul/2008		
Date of Discharge	22/Jul/2008		
Date of First Consultation	20/Jul/2008		

#### Advise & Treatment:

Tab	Ciplox-tz	1	0
Tab	Beplex forte	1	10
Tab	R-din 150	11	10
Tab	Dynapar	11	10
Cap	A.D.	1	0
Cap	A.D.	101	0

### Reports: Phone Book

### **PHONE BOOK**

PARTY PHONE NO. Page No. 1

Dushyant Giri Pappu yadav

Subodh Ramsingh

P. B. Mishra

Vajanti M. Patel

Nijbuddeen M Shekh

nijabuddeen Shekh

 Rohit D Bharwad
 25892317

 Ramesh R. Saroj
 25714884

Manjulaben A. Maru Subhash Nakum Subhas A. nakum Dineshbhai A. Solanki Jayaben B. Medu

Anil B. Yadav

### Address Book

#### ADDRESS BOOK

PARTY PHONE NO.

Dushyant Giri vatva G.I.D.C.

Pappu yadav Jasodanager

Subodh Ramsingh Hanumannager Vatva G.I.D.C.

Jasodanager Ahmedabad Page No.

1

P. B. Mishra Amraiwadi

Amraiwadi Ahmedabad

Vajanti M. Patel Naviwasahat Jasodanager

Ahmedabad

### Party Balance

#### **CLOSING BALANCES**

Party Closing Balance Page No. 1
Dushyant Giri -2400

Pappu yadav 0

Subodh Ramsingh 6005

P. B. Mishra 10125

Vajanti M. Patel 15000

# Party Case History

PARTY		NO	122	DT	06/Oct/2006	воок	CI
A00002 Dushyant Giri							
COMPLAINS	TYPE	PRESCRPIPTION		EN	IGLISH		QTY
TREATMENT		HINDI		GL	JJARATI		
	tab.	Alfapsin		-			10
				-			
	tab.	Alfapsin D					10
PARTY A00002 Dushyant Giri		NO	198	DT	22/Sep/2006	воок	CI
COMPLAINS	TYPE	PRESCRPIPTION		EN	IGLISH		QTY
TREATMENT		HINDI		GL	JJARATI		
	tab.	R-din 150		-			10
		•		-			
	tab.	Ofay 200		-			10
	tab.	Beplex-forte		-			10
	tau.	Debiex-forte					10
	tab.	Taxideep 0.5					5
				-			
	tab.	Iron-folic		-			60
		•					

# Party Ledger

√ No	Vouch Dt.		Party Name	Debit	Cred	lit	Bal	F Cr I	⊃age∶ 1 Dr
arty Na	ame A00	0002	Dushyant Giri		From To		01. 01 01. 10		
	01-01-01		Opening Balance	0.00			0.0	0	DR
82	16-12-05	BL	CONSULTATION INCOME	12600.00			12600.0	0	DR
	01-01-10		Closing Balance		12600	0.00	12600.0	0	DR
			Total	12600.00	12600	0.00	0.0	0	

# Receipt / Payment Register

#### PAYMENT REPORT

Vouch	Date	Name	Amount	Narration
1	25/02/2	DR. PREMAL	7878.00	SDLKFJLSK
2	03/08/2	parchuran a/c	800.00	DAKOR
3	06/08/2	parchuran a/c	650.00	SIGNETURE
4	06/08/2	Vimla Hospital	550.00	O.T. LIGHT
5	08/08/2	Vimla Hospital	4200.00	INTERNET
6	08/08/2	parchuran a/c	500.00	PINTU C/O
7	08/08/2	parchuran a/c	150.00	HOME
12	09/11/2	KASAR ACCOUNT	950.00	KASAR
8	10/08/2	parchuran a/c	1600.00	HOME
9	10/08/2	Vimla Hospital	6500.00	SALARY
10	22/08/2	Vimla Hospital	400.00	GIVEN FOR
11	22/07/2	KASAR ACCOUNT	4800.00	KASARGIVE
13	25/09/2	ManibenR.Patel	500.00	KASAR
14	25/09/2	Nijbuddeen M	345.00	.KJ
15	17/10/2	COMPUTER	2000.00	ON A/C TO
16	23/08/2	Mitesh G.Patel	300.00	CONSULTIN

# Income / Expense Register

#### EXPENSEREPORT FROM DATE:01/Jan/2004 TO DATE

Vouch 1 2 3 4 5 6 7 9 10 12 13	02/10/2 21/09/2 04/01/2 05/01/2 28/02/2 06/08/2	Name Mahendrabhai G. Dineshbhai A. Ratilal G. malviya Sakurbhai Shekh Kavitaben M. Rinkudevi Ramchandra J. Gopalsingh Mukeshbhai Jabbar N.Shah KASAR ACCOUNT	1020.00 300.00 300.00 1925.00 3825.00 1000.00 1925.00 3075.00 2800.00 4300.00	KASAR KASAR KASAR KASAR KASAR KASAR KASAR
. —				KASAR KASAR