JIT KAUR DO GURDIAL SINGH c/o Blk 7 Sin Ming Industrial Estate #01-76 Singapore 575642 Date: 27-01-2073 LONPAC INSURANCE BHD MOTOR CLAIMS DEPT. 300 BEACH ROAD # 17-04/07 THE CONCOURSE SINGAPORE 199555

Dear Sir / Madam

ACCIDENT INVOLVING MOTOR VEHICLES SKZ 4822 B AND XD 6852 M
ALONG ALJUNIED ROAD ON 15-10-2032 SKZ 4822 B I / We, the owner of Vehicle No. which was involved in the above accident.

My / Our vehicle sustained damages as a result of the above said accident and I / we are now claiming against you for the followings:-

- Costs of repair

  Loss-of-Use/Rental fees (8 DAY) 4 1800.00

  Police / GIA report / LTA fees 4 3-00 1.
- 2.
- 3.
- 4.
- Others Dawin & Aresentian
  Missian Feb.
  Total: #31948.65

Please advise whether you are now prepare to settle my claims as outlined above.

I / We hereby authorise my / our repairers, M/s Alan's United Auto Pte. Ltd. and/or their representatives to negotiate/compromise settlement of my / our above claim on my / our behalf. If there is a settlement I / we further authorise you to pay whatever settlement sum to my / our repairers being the outstanding repair bill and incidentals due to them.

Your kind attention and prompt settlement is much appreciated.

Yours faithfully,

# LETTER OF AUTHORITY

ACCIDENT INVOLVING SKZ 4802B AND XD 6852M
ALONG ALJUNIED ROAD
ON_15-(0-2022
BY THE LETTER OF AUTHORITY, I/We, JIT KAUR DO GURDIAL SINGH  NRIC NO. Singapore 575642, and/or their representative to process the Third Party claim on my/our behalf and to do all and/or any of the followings:  1. To submit, negotiate/compromise and to resolve settlements of my/our above mentioned claim.  2. To collect payment(s) due in respect of any such claim(s) for the loss and damage, such payment to be made by way of Cheque in favor of Alan's United Auto Pte. Ltd.  3. For any of the purpose aforesaid, to execute, sign and deliver all documents whatsoever as they deem necessary for the purpose of settling my/our said claim.
I/We hereby declare that all the processing and documents done by virtue of this letter of authority on my/our behalf by my/our repairers or any person authorized by them shall be as good valid and effectual to all intends and purposes whatsoever as if the same had been done or executed by me/us in person.  I/We further confirm that the acceptance by Messrs Alan's United Auto Pte. Ltd. of the settlement amount constitute the full discharge of my/our claim(s) in respect of the above accident.  Signed on the

Acknowledged by Owner

(company stamp if applicable)

# ALAN'S UNITED AUTO PTE. LTD.

Block 7, Sin Ming Industrial Estate, #01-76, Singapore 575642.

Tel: 6453 8686 (3 Lines) Fax: 6459 6550

Company Reg. No.: 201113667N

GST Reg. No.: 201113667N

No.: 16432

PAGE: 1

Vehicle Insured : XD6852M

Accident Date : 15-Oct-2022

Date : 26-Jan-2023

Our Ref: 022171 (LONPAC) / CHAN

out not a date of the first of

JIT KAUR D/O GURDIAL SINGH 244 LORONG CHUAN #05-05 Singapore 556745

FINAL REPAIR COST FOR TOYOTA WISH SKZ4822B

To supply spare parts

To towing

To rewire damaged parts and refocus headlamp beam.

To remove roof lining, front and rear seats, trim board and carpet

To apply undersealing

To dismantle and lower front undercarriage

To check and adjust wheel alignment

To putty and spray replaced parts

To remove, cut-out damaged parts, panel beating, welding, align, refix and to renew above parts

18,350.00

Add 7% GST : 1,284.50

Total: S\$19,634.50

\_\_\_\_\_\_

Singapore Dollars Nineteen Thousand Six Hundred and Thirty Four and Cents Fifty Only

# CHIN HUI CAR RENTAL

BLK 7, SIN MING INDUSTRIAL ESTATE, SECTOR C, #01-76,

SINGAPORE 575642. TEL: 6453 4680

## VEHICLE RENTAL AGREEMENT

09356 NO: REGN. NO.: 53090791K 306 850 HIRER'S PARTICULAR Vehicle No: SKQ662 U Mileage Out: Auto / Manual Toyota Altis JIT KAUR DIO GURDIAL SINGH Make & Model: 1730hrs OUT: Date 15.10.2022 **OUT**: Time 244 LORONG CHUAN #05-05 Replace Veh No: Mileage Out: S'PORE 556745 **OUT**: Time **OUT**: Date Driving Licence No: S2(74397F 02.07.1999 Pass Date: CHARGES Contact Number: 180 00 Daily @\$ 1001 per day DRIVERS PARTICULARS (if different from Hirer) per week Weekly @\$ Monthly @\$ per month Appointed Driver: \_ @\$ per hour Hours NRIC / Passport No: \_ Date of Birth: Others @\$ Address: Pass Date: Driving Licence No: 180. Contact Number: 00 SUB-TOTAL \$ **Terms & Conditions** PETROL LEVEL Out F 1/4 **ADDITIONAL S\$3000.00 EXCESS** 3/4 1/4 1/2 In F For Hirer / Driver Age 23 years old & below. 100 00 TOTAL CHARGES \$ Age 70 years old & above. Less than Two (2) years Driving Experience. **IMPORTANT!** FOR SINGAPORE USE ONLY Malaysia Excess (Exclude Towing Fees and Any Charges in Malaysia) - \$3,500.00 Excess Liability : \$\$2500.08 REMARKS ALLOWED Malaysia Excess (With Prior Consent): SKZ 4822B Hirer's Signature PAYMENT METHOD: BANK TRANSFER: OCBC 531-709517-001

I have read and agree to the terms and condition on both sides of this agreement. If I have presented a charge/credit card for payment, I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given CHIN HUI CAR RENTAL in connection with this agreement is true.

Addition Driver's Signature

#### \* IMPORTANT

PAYNOW: 53090791K

- 1. ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER, AND ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- 2. THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
- 3. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY, AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY CHIN HUI CAR RENTAL.
- 4. IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY, IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.

RETURN OF VEHICLE. THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO CHIN HUI CAR RENTAL AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENCED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY		
02/11/22	1-45 pm	307208	lipi	SIGNATURE OF HIRER / DRIVER	

# CHIN HUI CAR RENTAL REGN. NO.: 53090791K

BLK 7, SIN MING INDUSTRIAL ESTATE, SECTOR C, #01-76, SINGAPORE 575642. TEL: 6453 4680

#### **CUSTOMER**

JIT KAUR D/O GURDIAL SINGH C/O ALAN'S UNITED AUTO PTE LTD

BLK 7 SIN MING IND. ESTATE SECTOR C, #01-76 SINGAPORE 575642.

MR. ALAN KHONG

INVOICE NO: C22331

DATE

: 17.11.2022

**TERM** 

: CASH

#### **RENTAL FEES FOR:-**

S/N	VEHICLE NO.	VRA NO.	REFERENCE	NO. OF DAYS	UNIT PRICE (\$)	AMOUNT (\$)
1	SKQ 662U	9356	SKZ 4822B	18	\$ 100.00	\$ 1,800.00
		***	******	***		
						1

TOTAL:

1,800.00

\$

#### **PAYMENT MODE:**

BY CHEQUE:

CHIN HUI CAR RENTAL

BANK TRANSFER:

OCBC 531-709517-001

PAYNOW TO UEN:

53090791K

YOUR EARLY REMITTANCE IS MUCH APPRECIATED.

CHIN HUI CAR RENTAL

**INSURER ENQUIRY** 

# **Find** insurer

Vehicle reg. no.

XD6852M

**Date of Accident** 

15/10/2022



Reset

## % RESULT & RECEIPT

TP Insurer Enquiry	
Insurance	Lonpac Insurance Bhd
Period of Insurance	
Requested By	KHONG SHI JIE (ALAN'S UNITE
Requested Date	15/10/2022 15:30
	Y

**Payment details** 

Request Amount: \$\$1.87 GST Amount: \$\$0.13

Total Amount Due (GST Inclusive): \$\$2

**General Insurance Association** 

Records Management Centre GST Registration No: M400017735





MC No

: 4410087

Issue Date: 16 Oct 2022 (12:54)

NRIC

: S2174397F

NAME

VISIT NO

: JIT KAUR D/O GURDIAL SINGH

ADMISSION DATE

: 15 Oct 2022

DISCHARGE DATE

: 16 Oct 2022 : 2022814267

This is to certify that the above mentioned has been given:

#### **HOSPITALIZATION / POST HOSPITALIZATION LEAVE**

For 5 days

From 15 Oct 2022 to 19 Oct 2022

PRINCIPAL DOCTOR

: NARAYANASWAMY VENKETASUBRAMANIA (RD) (03524F)

PREPARED BY

: RAVINDRA KUMAR KARUTURI (M14550E)

DEPARTMENT

: WARD 13, Raffles Hospital

**ADDRESS** 

: 585 North Bridge Road Raffles Hospital 188770

Printed: 16 Oct 2022, 12:55PM

 $This \ certificate \ is \ not \ valid \ for \ absence \ from \ court \ or \ other \ judicial \ proceedings \ unless \ specifically \ stated.$ 

\*This certificate is electronically generated. No signature is required.



Download RafflesConnect to:

- . Teleconsult with our GP Doctor
- . Request eQueue before coming to GP clinic
- . Book an appointment for GP phone consult
- . More features ...

Medicine Delivery Service:

. Scan QR Code to request online.

North Bridge Road | Singapore 188770 Tel: 6311 1111 | Fax: 6338 1318 Website: www.raffleshospital.com Registration No. 199303258D



#### **TAX INVOICE**

GST REG NO.

: M9-0000467-N

COMPANY REG NO.

: 199303258D

**BILL TYPE** 

: In-Patient Bill - Detail By Bill

CASE NO.

: 2022814267

BILL DATE

: 19.10.2022

PAY BY

: SELF

ADMISSION DATE/TIME DISCHARGE DATE/TIME

: 15.10.2022 : 16.10.2022

18:51 13:35

HRN NO.

PATIENT ID NO.

PATIENT NO.

: XXXXX397F

: 1141491

REFERENCE NO.

PRINT DATE

: 19.10.2022

JIT KAUR D/O GURDIAL SINGH 244 LORONG CHUAN

#05-05

SINGAPORE 556745

**PAGE** 

: 1 of 3

PATIENT NAME

: JIT KAUR D/O GURDIAL SINGH

S	S\$	UOM	QTY	SERVICE DESCRIPTION	CODE/REF	DATE
130.6				A&E/SOC SERVICES		
	130.60		1.00	A&E SERVICES B4 HOSPITALISATION	511000	15.10.2022
174.9				ACCOMMODATION		
	174.95		1.00	MULTI-BEDDED ROOM	A080311	15.10.2022
63.0				CONSULTATION		
	63.00		1.00	WARD RMO SERVICE	A070078	16.10.2022
183.3				DAILY TREATMENT FEE		
	183.37		1.00	DAILY TREATMENT FEE	A080201	15.10.2022
89.2				LABORATORY		
	89.28		1.00	VRE SCREENING	457236	15.10.2022
41.7				MEDICAL CONSUMABLES		
	3.61	PC	1.00	DISH,KIDNEY PLASTIC 248X145X40X0.45 MM	804731	15.10.2022
	15.13	PC	1.00	HYGIENE SHEET 80X210CM #190077445402	800314	15.10.2022
	1.14	PC	2.00	MASK,## FACE SURGICAL EAR-LOOP (NC)	802514	15.10.2022
	3.11	вох	1.00	TISSUE, ## FACIAL W/RH LOGO 90PCS	801800	15.10.2022
	15.13	PC	1.00	HYGIENE SHEET 80X210CM #190077445402	800314	16.10.2022
	3.61	PC	1.00	DISH,KIDNEY PLASTIC 248X145X40X0.45 MM	804731	16.10.2022
163.1				PHARMACEUTICAL		
	19.54	G	30.00	KETOPROFEN 2.5% (FASTUM) GEL, 30G	602185	15.10.2022
	62.37	EA	100.00	9-VITAMIN D3 (CHOLECALCIFEROL)1000IU CAP	603252	15.10.2022
	1.44	EA	2.00	ANTACID TAB	647021	15.10.2022
	0.72	EA	1.00	DICLOFENAC 50MG TAB	701566	15.10.2022
	0.61	EA	2.00	PARACETAMOL 500MG TAB	603841	15.10.2022
	19.54	G	30.00	KETOPROFEN 2.5% (FASTUM) GEL, 30G	602185	16.10.2022
	14.41	EA	20.00	ANTACID TAB	647021	16.10.2022

# RafflesHospital

#### TAX INVOICE

GST REG NO.

: M9-0000467-N

**COMPANY REG NO.** : 199303258D

**BILL TYPE** 

: In-Patient Bill - Detail By Bill

Group

CASE NO.

: 2022814267

**BILL DATE** 

: 19.10.2022

PAY BY

: SELF

ADMISSION DATE/TIME DISCHARGE DATE/TIME

: 15.10.2022 : 16.10.2022 18:51 13:35

HRN NO.

PATIENT ID NO.

PATIENT NO.

: XXXXX397F : 1141491

REFERENCE NO.

**PRINT DATE** 

: 19.10.2022

JIT KAUR D/O GURDIAL SINGH 244 LORONG CHUAN

#05-05

SINGAPORE 556745

PAGE

: 2 of 3

**PATIENT NAME** 

: JIT KAUR D/O GURDIAL SINGH

DATE	CODE/REF	SERVICE DESCRIPTION	QTY	UOM	S\$	S\$
16.10.2022	701566	DICLOFENAC 50MG TAB	10.00	EA	7.21	
16.10.2022	602787	KETOPROFEN 30MG PLASTER	18.00	EA	29.94	
16.10.2022	603841	PARACETAMOL 500MG TAB	24.00	EA	7.32	
		RADIOLOGY				1,786.56
15.10.2022	341220	CT CERVICAL SPINE	1.00		891.20	
15.10.2022	341229	CT HEAD (PLAIN)	1.00		895.36	
		SURGICAL/MEDICAL PROCEDURE				225.78
15.10.2022	PF5952	SPECIALIST CASE MANAGEMENT	1.00		200.00	
16.10.2022	FF9016	BLOOD GLUCOSE MONITORING	1.00		25.78	
		WARD PROCEDURES				16.20
15.10.2022	A070071	ADMISSION ASSESSMENT	1.00		16.20	
15.10.2022	511002	NON SUBSIDISED ITEMS A&E (NON-SUBSIDISED ITEM) B4 HOSPITALISATION	1.00		8.00	8.00
		ONAL FEES BY RAFFLES CONSULTAN	TS 1ST EMERGENCY		070.00	540.00
	(RD	YANASWAMY VENKETASUBRAMANIA	<b>ACTIVATION B4 MN</b>	N: GEN	270.00	
	DR. NARA) (RD	YANASWAMY VENKETASUBRAMANIA	WD WARD ATTENDANO SUN/PH A000306	CE	270.00	
SUB TOTA	,					3,422.57
LESS: GOV	ERNMENT S	SUBSIDY				(3,036.97)
AMOUNT F	PAYABLE BE	FORE GST				385.60
GST @ 7%						26.99
AMOUNT F	PAYABLE AFT	TER GST				412.59
LESS: GST	ABSORBED	BY GOVERNMENT				(26.43)
TOTAL HO	SPITAL CHAI	RGES				386.16

RafflesHospital

**TAX INVOICE** 

GST REG NO.

: M9-0000467-N

COMPANY REG NO. **BILL TYPE** 

: 199303258D : In-Patient Bill - Detail By Bill

Group

CASE NO.

: 2022814267

**BILL DATE** 

: 19.10.2022

PAY BY

: SELF

ADMISSION DATE/TIME

: 15.10.2022

18:51

DISCHARGE DATE/TIME

: 16.10.2022

13:35

HRN NO.

PATIENT ID NO.

: XXXXX397F

PATIENT NO.

: 1141491

REFERENCE NO.

**PRINT DATE** 

: 19.10.2022

JIT KAUR D/O GURDIAL SINGH

244 LORONG CHUAN

#05-05

SINGAPORE 556745

PAGE

: 3 of 3

PATIENT NAME

: JIT KAUR D/O GURDIAL SINGH

DATE	CODE/REF	SERVICE DESCRIPTION		QTY	UOM	S\$	S\$
NET AMO	UNT PAYABLE						386.16
ROUNDIN	G ADJUSTMEN	NT					(0.01)
TOTAL AN	OUNT PAID (F	PAID)/REFUND					(391.15)
JIT KAUR	D/O GURDIAL	SINGH					
CREDIT	CARD	VISA	XXXX-XXXX-XXXX-9	235		391.15	
TOTAL BA	ALANCE DUE						(5.00)
AMOUNT	DUE FROM	JIT KAUR D/O GURDIAL SII	NGH				(5.00)

REMITTANCE ADVICE

PATIENT NAME

JIT KAUR D/O GURDIAL SINGH

BANK/CHEQUE NO.

PATIENT ID NO.

XXXXX397F

CHEQUE AMOUNT

CASE NO.

: 2022814267

**BALANCE DUE** 

: S\$ 0.00

Raffles Hospital | 585 North Bridge Road | Singapore 188770

Tel: 6311 1111

Website: www.raffleshospital.com

Registration No. 199303258D



Company Reg No: 199202734G

Date: 15/10/2022

Name: JIT KAUR D/O GURDIAL SINGH

Clinic Visit No: G09822054413 Sex : Female Age: 066Y NRIC: S2174397F Accession No: 226290204960

Alt ID : -

LO SZE MAN CONNIE Referring Doctor :

RMG IST LEVEL - 24HR EMERGENCY Referring Clinic

Performing Centre: RAFFLES NUCLEAR MEDICINE CENTRE (RAFFLES HOSF

#### CT CERVICAL SPINE

CT scan of cervical spine was performed. No previous study is available for comparison.

Loss of the expected lordosis.

The craniovertebral junction is congruent. The atlantoaxial alignment is maintained.

The vertebral bodies are normal in height and reveal normal alignment. The posterior elements are intact and the facet joints are congruent. No fracture or dislocation is seen.

Mild degenerative changes in the cervical spine. Moderate narrowing of the C5/C6 disc space. Multilevel mild to moderate facet arthropathy.

Pre-and paraspinous soft tissues are unremarkable.

The airway is patent. Visualised lungs are unremarkable.

#### Impression:

No fracture or dislocation is seen in the cervical spine. Further evaluation with MRI of cervical spine may be done if clinically concerned about the spinal cord injury.

DR PRAVIN MUNDADA MBBS (INDIA), FRCR (UK) Consultant, Radiology Department

This is a computer generated result, no signature is required. Printed on 16/10/2022 12:17:59

Page 1 of 1

Raffles Diagnostica Pte Ltd Company Registration No.: 199202734G

Laboratory

585 North Bridge Road Level 7 Raffles Hospital Singapore 188770 | Tel: (65) 6311 1760 | Fax: (65) 6311 1194

Radfles Hospital | September |



Company Reg No: 199202734G

Date: 15/10/2022

Name: JIT KAUR D/O GURDIAL SINGH

Sex : Female Age: 066Y

NRIC: S2174397F

Alt ID : -

Referring Doctor :

LO SZE MAN CONNIE

Referring Clinic :

RMG IST LEVEL - 24HR EMERGENCY

Performing Centre:

RAFFLES NUCLEAR MEDICINE CENTRE (RAFFLES HOSF

## **CT HEAD**

Non-enhanced CT scan of brain was performed. Review of the previous study dated: None.

No acute intracranial haemorrhage or evidence of acute territorial infarct is seen.

The grey-white matter differentiation is maintained. No mass effect or midline shift. No hydrocephalus. The basal cisterns are preserved.

A mucosal retention cyst/polyp is seen in the right maxillary sinus. Bilateral orbits and mastoids are unremarkable.

No skull fracture.

Impression:

No acute intracranial haemorrhage or evidence of acute territorial infarct or skull fracture.

DR PRAVIN MUNDADA MBBS (INDIA),FRCR (UK) Consultant, Radiology Department

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Raffles Diagnostica Pte Ltd Company Registration No.: 199202734G

Page 1 of 1

Laboratory

585 North Bridge Road Level 7 Raffles Hospital Singapore 188770 | Tel: (65) 6311 1760 | Fax: (65) 6311 1194

Clinic Visit No:

Accession No:

G09822054413

226290204961



Your Trusted Partner for Health RMG 24Hr Accident and Emergency

585, North Bridge Road 24 hrs Emergency

Singapore 188770

Name

: JIT KAUR D/O GURDIAL SINGH

Age / Sex

:66/F

NRIC No

: S2174397F

Alt ID

Laboratory No

: 2210151029

Date Received

: 15 October 2022 15:44:07

#### **MICROBIOLOGY**

Specimen: NASAL GROIN AXILLA

#### Culture

Methicillin Resistant Staphylococcus aureus (MRSA) Not Detected

RafflesDiagnostica MOH License No. 9700042/09/212

Dr Nicholas Goh Seng Geok
Consultant Pathologist
MBBS, FRCPA, FAMS (Path)

Dr Jean Ho May Sian
Consultant Pathologist
MBBS, FRCPAth(UK)

Generated from ERS on: 10/16/2022 12:17:50 PM Page 1 ofl Results electronically verified. No signature is required.

Raffles Diagnostica Pte Ltd Company Registration No.: 199202734G

Laboratory

585 North Bridge Road Level 7 Raffles Hospital Singapore 188770 | Tel: (65) 6311 1760 | Fax: (65) 6311 1.194

Radiology
Changl Airport Terminal 3
Marina Bay Financial Centre
Raffles Holland V
Shaw Centre Singapore 278997 | Tel: (65) 6341 8318 | Fax: (65) 6241 3498
12 Marina Bay Financial Centre Tower 3 Singapore 218997 | Tel: (65) 6363 0390 | Fax: (65) 6364 553
12 Marina Bay Financial Centre Tower 3 Singapore 218997 | Tel: (65) 6255 1101 | Fax: (65) 6259 919
13 Scotts Road #04-09 to 14 Shaw Centre Singapore 228208 | Tel: (65) 6838 0080 | Fax: (65) 6838 8885
12 Marina Bay Financial Centre Tower 3 Singapore 218997 | Tel: (65) 6838 0080 | Fax: (65) 6838 8885
13 Marina Bay Financial Centre Tower 3 Singapore 228208 | Tel: (65) 6838 0080 | Fax: (65) 6838 8885
14 Marina Bay Financial Centre Tower 3 Singapore 228208 | Tel: (65) 6838 0080 | Fax: (65) 6838 8885
15 Marina Bay Financial Centre Tower 3 Singapore 228208 | Tel: (65) 6838 0080 | Fax: (65) 6838 8885
16 Marina Bay Financial Centre Tower 3 Singapore 228208 | Tel: (65) 6838 0080 | Fax: (65) 6838 8885
17 Marina Bay Financial Centre Tower 3 Singapore 228208 | Tel: (65) 6838 0080 | Fax: (65) 6838 8885
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18 Marina Bay Financial Centre Tower 3 Singapore 228208 | Tel: (65) 6838 0080 | Fax: (65) 6838 0080 |



# **Inpatient Discharge Medical Summary**

**Patient Information** 

Name:

JIT KAUR D/O GURDIAL SINGH

ID No.:

S2174397F

Gender/DoB:

FEMALE / 16.08.1956

Age:

66 Y 2 M

Address:

244 LORONG CHUAN #05-05 SG 556745

Admission Information

Admission Date/Time: Discharge Date/Time:

15.10.2022 18:51:00 16.10.2022 14:00:00

Surgery Date

Discharge Type:

10.10.2022 14.00.

Duration of Stay:

Discharge

Dringing Dr.

2

Principal Dr.:

NARAYANASWAMY VENKETASUBRA

Dept / Location: W1341

Diagnosis

Primary:

Contusion of unspecified body region

Diagnosis Remarks: multiple

ICD10 Code

Surgical Code

T1405

Procedure

Allergies & Medical Alerts

Drug Allergy:

OTHERS - GLIPIZIDE

Medical Alert:

NIL

**Clinical Summary** 

Chief Complaint / Reason for Admission:

66/Ind/F

At around 1pm, while driving, her car was hit on the left side by a lorry, causing her car to spin, stopping when she braked hard and car hit a kerb

Was then in state of shock, shivering, head spinning, unable to walk straight, blur vision, dry throat causing her to choke

Then developed intermittent R head and neck pain and backache

Past hx - HPT DM HLD anaemia, knee pain

Allergy - glipizide recorded, pt does not think she is allergic

Fly hx - brain, spine - 0

Med - colecalciferol, linagliptin, losartan, Glucophage XR, atorvastatin

Clinical Findings:

Well No external signs of injury

Tender R scalp, R lower rib cage, R back

Painful neck movements

Inpatient Management and Progress:

Symptoms generally improved with paracetamol, diclofenac/antacid, ketoprofen gel and plaster

CT brain - normal

CT cervical spine - losa of lordosiss, mild degenerative changes

Xray lumbar and thoracic spine - done

CXR - ordered

Treatments and Investigations

Radiological Investigations

CT SCANS

15.10.22 CT CERVICAL SPINE 15.10.22 CT HEAD (PLAIN)

Condition at Discharge:

Stable

Follow up appointment Date:

Discharge Advice:

To follow up at SOC. If unwell, return to A&E.

Name: JIT KAUR D/O GURDIAL SINGH

ID No.: S2174397F

Admission Date:

15.10.2022 18:51:00

\*This is a computer generated copy. No signature is required.

\*This is not a medical report. For Patient's Personal Reference Only.

Page 1 of 2

Raffles Hospital | 585 North Bridge Road | Singapore 188770 Tel: 6311 1111 | Fax: 6338 1318 Website: www.raffleshospital.com Registration No. 199303258D



Your Trusted Partner for Health

# **Inpatient Discharge Medical Summary**

**Patient Information** 

JIT KAUR D/O GURDIAL SINGH Name:

ID No.: S2174397F

Gender/DoB: FEMALE / 16.08.1956

66 Y 2 M

244 LORONG CHUAN #05-05 SG 556745 Address:

**Admission Information** 

15.10.2022 18:51:00 Admission Date/Time: 16.10.2022 14:00:00 Discharge Date/Time:

Discharge Discharge Type:

**Duration of Stay:** 

Principal Dr.: NARAYANASWAMY VENKETASUBRA

Dept / Location: W1341

For continuity of care:

Please review and manage.

N.V.RAMANI (M03524F) Completed by: 16.10.2022 12:12 PM Printed on:

Name: JIT KAUR D/O GURDIAL SINGH

S2174397F

Admission Date:

15.10.2022 18:51:00

\*This is a computer generated copy. No signature is required.

\*This is not a medical report. For Patient's Personal Reference Only.

Page 2 of 2



## TAX INVOICE

**GST REGN NO** 

: M9-0000467-N

CLINIC

: 24 HR EMERGENCY

VISIT NO

: G09822054414

**BILL TYPE** 

: ECC\_RPT\_10\_AE

VISIT DATE/TIME : 15/10/2022 14:43:00

: 15/10/2022

**BILL DATE** 

: SORINTHER KOUR D/O

INVOICE NO

: PG09822054414-1

PATIENT NAME

PAY BY

: \*\*\*\*\*980J

PATIENT ID NO

JOTHIRAMBUL

PAYER'S NAME

: SORINTHER KOUR D/O

: \*\*\*\*\*980J

**JOTHIRAMBUL** 

POLICY NO

**ADDRESS** : 159 BISHAN STREET 13 #03-56 SINGAPORE 570159

DESCRIPTION	REMARK	QTY	S\$	S\$
ATTENDANCE FEE	STANDARD	1.0	121.00	121.00
SUB-TOTAL			_	121.00
LESS: GOVERNMENT SUBSIDY				(0.00)
TOTAL CHARGES BEFORE GST				121.00
GST@ 7%				8.47
TOTAL CHARGES AFTER GST				129.47
LESS: GST ABSORBED BY THE GO	OVERNMENT		-	(8.47)
NET TOTAL CHARGES				121.00
TOTAL AMOUNT PAID				(121.00)
REG2201603882 - 15/10/2022 - M	ASTER		121.00	
TOTAL BALANCE DUE				0.00
AMOUNT DUE FROM PATIENT				0.00

RafflesHospital
24 HR EMERGENCY
585 North Bridge Road
Raffles Hospital #01-00 Singapore 188770
Tel: (65) 6311 1555 Fax: (65) 6311 1162



Our Ref: TP/IP/28071/2022

JIT KAUR D/O GURDIAL SINGH 244 LORONG CHUAN #05-05
Singapore 556745

Traffic Police 10 Ubi Avenue 3 Singapore 408865

IB Call Centre: 65470000

Date: 14/12/2022

Dear Mdm

TRAFFIC ACCIDENT INVOLVING SKZ4822B, SBS6645B & XD6852M ALONG ALJUNIED ROAD ON 15/10/2022 AT ABOUT 1318 HRS

I refer to the above accident.

- We have completed our investigation into the case. Action has been initiated against the driver of XD6852M for the offence of Careless Driving without Due Care and Attention Causing Hurt under Sec 65(1)(a) punishable under Sec 65(4)(a) RTA Cap 1961 (Heavy Vehicle).
- 3 Please be informed that our decision does not preclude you from pursuing insurance / civil claims.
- If you have any clarification, you may contact the Investigation Officer, Lee Guang Hui at office number: 65476423.

Yours faithfully, Sr Staff Sgt Lee Guang Hui Investigation Officer (GIT B) Traffic Police Singapore Police Force

This is a computer-generated letter. No signature is required.

