

IN PATIENT SUMMARY BILL

UHID : MHI202379723

IP No : IPH2024000785

Patient name : Ms.RAHMATH NISHA

Age : 52/Female

Bill No : MMH/HM/IPH202400822

Bill Date : 09/04/2024

DOA : 2/4/2024 11:31AM

DOD :

Entity Type : Corporate

Entity Name : GMONEY

Consultant Name : Dr.ANBARASU MOHANRAJ

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 1,100.00
2	BED CHARGES	₹ 34,800.00
3	BLOOD COMPONENTS	₹ 500.00
4	DIET CHARGES	₹ 7,800.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 3,200.00
6	EQUIPMENT	₹ 14,700.00
7	GENERAL PROCEDURE	₹ 900.00
8	INTENSIVIST CHARGES	₹ 5,000.00
9	LABORATORY	₹ 19,745.00
10	MEDICAL RECORD CHARGE	₹ 200.00
11	NURSING CHARGE	₹ 7,200.00
12	OP REGISTRATION	₹ 150.00
13	OPERATION THEATRE CHARGES	₹ 20,750.00
14	PHARMACY CHARGE	₹ 84,462.00
15	PHYSIOTHERAPY	₹ 9,100.00
16	PROFESSIONAL TEAM FEES	₹ 140,000.00
17	RADIOLOGY	₹ 5,965.00
18	SURGICAL PACKAGE-HEART	₹ 35,046.00
Gross Amount		₹ 390,618.00
Sanction Amount		₹ 300,000.00
Net Payable		₹ 390,618.00
Advance Amount		₹ 92,000.00
Received Amount		₹ 0.00
Refund Amount		₹ 1,382.00

Received Amount in Words : Ninety-Two Thousand Only

PRAVEEN KUMAR
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	02/04/2024	MMH/HM/RECAP2024005	CARD	Advance Amount	92,000.00

Medical Claim	Claim No	Sanction Amount
GMONEY	GMONEY	300,000.00