IN PATIENT SUMMARY BILL

: MMH/HM/IPH00447 : MHI202379972 UHID Bill No

: IPH202302376 : 06/12/2023 IP No Bill Date

: Mr.KRISHNAN G DOA Patient name 28/11/2023 10:57AM

: 47/Male DOD Age

: CASH Entity Type

Entity Name : CASH

Consultant Name · Dr.ANBARASU MOHANRAJ

S.No	Description		Amount
1	ACCOMMODATION	₹	2,250.00
2	ADMINISTRATION CHARGES	₹	200.00
3	BED CHARGES	₹	28,500.00
4	BLOOD COMPONENTS	₹	500.00
5	DIET CHARGES	₹	7,000.00
6	EQUIPMENT	₹	5,000.00
7	GENERAL PROCEDURE	₹	1,000.00
8	LABORATORY	₹	13,046.00
9	MEDICAL RECORD CHARGE	₹	200.00
10	NURSING CHARGE	₹	8,000.00
11	OP REGISTRATION	₹	150.00
12	OPERATION THEATRE CHARGES	₹	24,000.00
13	PHARMACY CHARGE	₹	74,824.00
14	PROFESSIONAL TEAM FEES	₹	25,000.00
15	RADIOLOGY	₹	3,400.00
16	SURGICAL PACKAGE-HEART	₹	6,930.00

₹ 200,000.00 **Gross Amount** Net Payable ₹ 200,000.00 ₹ **Advance Amount** 200,000.00 ₹ **Received Amount** 0.00

IYAPPAN R **Received Amount in Words** : Two Lakh Zero Only

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	2023-11-28 11:12:54.490	MMH/HM/RECAP00398	CASH	Advance Amount	100,000.00
2	2023-11-28 11:13:34.166	MMH/HM/RECAP00399	AFFORDPLAN	Advance Amount	100,000.00