

### IN PATIENT SUMMARY BILL

UHID : MHI202380952  
IP No : IPH202302427  
Patient name : Mr.KHALIL BASHA S  
Age : 62 Y 11 M 10 D/Male

Bill No : MMH/HM/IPH00487  
Bill Date : 11/12/2023  
DOA : 4/12/2023 9:48AM  
DOD :  
Entity Type : CASH  
Entity Name : CASH

Consultant Name : Dr.ANBARASU MOHANRAJ

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 200.00
2	BED CHARGES	₹ 28,750.00
3	BLOOD COMPONENTS	₹ 500.00
4	DIET CHARGES	₹ 7,600.00
5	EQUIPMENT	₹ 6,150.00
6	GENERAL PROCEDURE	₹ 1,000.00
7	INVESTIGATIONS	₹ 250.00
8	LABORATORY	₹ 17,798.00
9	MEDICAL RECORD CHARGE	₹ 200.00
10	NURSING CHARGE	₹ 14,000.00
11	OP REGISTRATION	₹ 150.00
12	OPERATION THEATRE CHARGES	₹ 24,000.00
13	PHARMACY CHARGE	₹ 68,252.00
14	PHYSIOTHERAPY	₹ 2,415.00
15	PROFESSIONAL TEAM FEES	₹ 70,000.00
16	RADIOLOGY	₹ 4,650.00
17	SURGICAL PACKAGE-HEART	₹ 9,085.00

**Gross Amount** ₹ **255,000.00**

**Net Payable** ₹ **255,000.00**

**Advance Amount** ₹ **255,000.00**

**Received Amount** ₹ **0.00**

**Received Amount in Words** : Two Lakh Fifty-Five Thousand Only

IYAPPAN R

**Authorised Signature**

### Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	2023-12-04 10:00:51.040	MMH/HM/RECAP00451	CASH	Advance Amount	200,000.00
2	2023-12-04 10:26:21.110	MMH/HM/RECAP00452	UPI	Advance Amount	55,000.00