

**IN PATIENT SUMMARY BILL**

UHID : MHI202381211  
IP No : IPH202302561  
Patient name : Mr.RAM MOHAN A  
Age : 72 Y 2 M 18 D/Male

Bill No : MMH/HM/IPH00632  
Bill Date : 28/12/2023  
DOA : 20/12/2023 1:20PM  
DOD :  
Entity Type : CASH  
Entity Name : CASH

Consultant Name : Dr.ANBARASU MOHANRAJ

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 600.00
2	BED CHARGES	₹ 32,875.00
3	BLOOD COMPONENTS	₹ 500.00
4	DIET CHARGES	₹ 7,100.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 4,000.00
6	EQUIPMENT	₹ 13,000.00
7	GENERAL PROCEDURE	₹ 1,500.00
8	INTENSIVIST CHARGES	₹ 5,000.00
9	LABORATORY	₹ 17,827.00
10	MEDICAL RECORD CHARGE	₹ 200.00
11	NURSING CHARGE	₹ 8,000.00
12	OP REGISTRATION	₹ 150.00
13	OPERATION THEATRE CHARGES	₹ 40,000.00
14	PHARMACY CHARGE	₹ 80,577.00
15	PHYSIOTHERAPY	₹ 7,700.00
16	PROFESSIONAL TEAM FEES	₹ 55,000.00
17	RADIOLOGY	₹ 4,308.00
18	SURGICAL PACKAGE-HEART	₹ 13,891.00
19	ULTRASOUND	₹ 2,772.00
Gross Amount		₹ 295,000.00
Net Payable		₹ 295,000.00
Advance Amount		₹ 295,000.00
Received Amount		₹ 0.00

Received Amount in Words : Two Lakh Ninety-Five Thousand Only

IYAPPAN R

Authorised Signature

**Payment History**

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	20/12/2023	MMH/HM/RECAP00602	CARD	Advance Amount	200,000.00
2	27/12/2023	MMH/HM/RECAP00697	CASH	Advance Amount	95,000.00