

IN PATIENT SUMMARY BILL

UHID : MHI202381301

IP No : IPH2024000010

Patient name : Mr.ANANDASELVAM N

Age : 67 Y 4 M 23 D/Male

Bill No : MMH/HM/IPH202400065

Bill Date : 09/01/2024

DOA : 2/1/2024 11:08AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.ANBARASU MOHANRAJ

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 400.00
2	BED CHARGES	₹ 26,000.00
3	BLOOD COMPONENTS	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 4,000.00
5	EQUIPMENT	₹ 8,700.00
6	GENERAL PROCEDURE	₹ 1,000.00
7	IMPLANT	₹ 37,170.00
8	INTENSIVIST CHARGES	₹ 5,000.00
9	LABORATORY	₹ 21,112.00
10	MEDICAL RECORD CHARGE	₹ 200.00
11	NURSING CHARGE	₹ 8,000.00
12	OP REGISTRATION	₹ 150.00
13	OPERATION THEATRE CHARGES	₹ 3,500.00
14	PHARMACY CHARGE	₹ 163,257.00
15	PROFESSIONAL TEAM FEES	₹ 2,000.00
16	RADIOLOGY	₹ 3,590.00
17	SURGICAL PACKAGE-HEART	₹ 3,421.00
18	ULTRASOUND	₹ 2,000.00
Gross Amount		₹ 290,000.00
Net Payable		₹ 290,000.00
Advance Amount		₹ 290,000.00
Received Amount		₹ 0.00

Received Amount in Words : Two Lakh Ninety Thousand Only

IYAPPAN R  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	02/01/2024	MMH/HM/RECAP2024000	AFFORDPLAN	Advance Amount	125,000.00
2	02/01/2024	MMH/HM/RECAP2024000	UPI	Advance Amount	10,000.00
3	02/01/2024	MMH/HM/RECAP2024000	UPI	Advance Amount	90,000.00
4	02/01/2024	MMH/HM/RECAP2024000	UPI	Advance Amount	65,000.00