

IN PATIENT SUMMARY BILL

UHID : MHI202481902

IP No : IPH2024000259

Patient name : Mr.CHANDRASEKHAR.R

Age : 49 Y 1 M 25 D/Male

Bill No : MMH/HM/IPH202400281

Bill Date : 08/02/2024

DOA : 4/2/2024 10:28PM

DOD :

Entity Type : Corporate

Entity Name : GMONEY

Consultant Name : Dr.K.JAISHANKAR

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 1,100.00
2	BED CHARGES	₹ 17,400.00
3	CARDIOLOGY PACKAGE-HEART	₹ 98,599.00
4	DIET CHARGES	₹ 3,900.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 1,600.00
6	EQUIPMENT	₹ 1,000.00
7	IMPLANT	₹ 196,917.00
8	INTENSIVIST CHARGES	₹ 2,500.00
9	LABORATORY	₹ 4,472.00
10	MEDICAL RECORD CHARGE	₹ 200.00
11	NURSING CHARGE	₹ 3,600.00
12	OP REGISTRATION	₹ 300.00
13	PHARMACY CHARGE	₹ 24,552.00
14	PROFESSIONAL TEAM FEES	₹ 70,000.00
15	RADIOLOGY	₹ 960.00
Gross Amount		₹ 427,100.00
Sanction Amount		₹ 400,000.00
Net Payable		₹ 427,100.00
Advance Amount		₹ 27,100.00
Received Amount		₹ 0.00

Received Amount in Words :

PRAVEEN KUMAR
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	07/02/2024	MMH/HM/RECAP2024003	CARD	Advance Amount	27,100.00

Medical Claim	Claim No	Sanction Amount
GMONEY	GMONEY	400,000.00