## IN PATIENT SUMMARY BILL

| | | | | | |
|---|---|---|---|---|---|
| UHID | : | MHI202482643 | Bill No | : | MMH/HM/IPH202400558 |
| IP No | : | IPH2024000516 | Bill Date | : | 11/03/2024 |
| Patient name | : | Mr.SIVAPRAGASH R | DOA | : | 5/3/2024 11:04AM |
| Age | : | 48 Y 9 M 9 D/Male | DOD | : | |
| | | | Entity Type | : | CASH |
| | | | Entity Name | : | CASH |
| Consultant Name | : | Dr.ANBARASU MOHANRAJ | | | |

| S.No | Description | | Amount |
|---|---|---|---|
| 1 | ADMINISTRATION CHARGES | ₹ | 600.00 |
| 2 | BED CHARGES | ₹ | 26,000.00 |
| 3 | BLOOD COMPONENTS | ₹ | 500.00 |
| 4 | DIET CHARGES | ₹ | 8,100.00 |
| 5 | DUTY MEDICAL OFFICER CHARGE | ₹ | 3,200.00 |
| 6 | EQUIPMENT | ₹ | 12,200.00 |
| 7 | GENERAL PROCEDURE | ₹ | 900.00 |
| 8 | INTENSIVIST CHARGES | ₹ | 5,000.00 |
| 9 | LABORATORY | ₹ | 12,981.00 |
| 10 | MEDICAL RECORD CHARGE | ₹ | 200.00 |
| 11 | NURSING CHARGE | ₹ | 7,200.00 |
| 12 | OP REGISTRATION | ₹ | 150.00 |
| 13 | OPERATION THEATRE CHARGES | ₹ | 27,500.00 |
| 14 | PHARMACY CHARGE | ₹ | 85,646.00 |
| 15 | PHYSIOTHERAPY | ₹ | 9,100.00 |
| 16 | PROFESSIONAL TEAM FEES | ₹ | 40,000.00 |
| 17 | RADIOLOGY | ₹ | 4,930.00 |
| 18 | SURGICAL PACKAGE-HEART | ₹ | 50,793.00 |
| | **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

AKASH

**Authorised Signature**

**Payment History**

| S.No | Receipt Date | Receipt Code | Payment Mode | Trans. Type | Received Amount |
|---|---|---|---|---|---|
| 1 | 05/03/2024 | MMH/HM/RECAP202400 | CARD | Advance Amount | 200,000.00 |
| 2 | 05/03/2024 | MMH/HM/RECAP202400 | CASH | Advance Amount | 95,000.00 |