MEDWAY HOSPITALS

ERODE MULTISPECIALITY

NO.134/138, N.H.Main Road , Nasiyanur, Erode , Tamilnadu, India

9280233285

care@medwayhospitals.com

INTERIM Bill

Patient ID	:	**MHE202400059**	IP No	:	**IPE2024000003**
Patient Name	:	**Mrs.AASAMAINAVATHI**	Admission Date	:	**04/04/2024 4:10:00AM**
Age/Gender	:	**27/Female**	Doctor Name	:	**Dr.KANNAMMAL DURAISAMY**
Entity Type	:	**Self**	Ward Name	:	**SINGLE ROOM**
			Bed Name	:	**G-19**
Payment Type	:	**Cash**			

Service Date	ReceiptNo	Service Name	Quantity	Unit Rate	Total Amount
ACCIDENT / TRAUMA (MLC) REGISTRATION					
07/04/2024	IPREQ202400039	MLC REGISTRATION CHARGE (IP)	1.00	4,000.00	₹ 4,000.00
ADMINISTRATION CHARGES					
07/04/2024	IPREQ202400040	ADMISSION CHARGES	1.00	200.00	₹ 200.00
BED CHARGES					
04/04/2024		BED CHARGES - ICU	2.00	3,500.00	₹ 7,000.00
05/04/2024		BED CHARGES - SINGLE ROOM	2.00	1,400.00	₹ 2,800.00
DUTY MEDICAL OFFICER CHARGE					
04/04/2024		DMO CHARGE	2.00	500.00	₹ 1,000.00
05/04/2024		DMO CHARGE	2.00	500.00	₹ 1,000.00
EQUIPMENT					
04/04/2024	IPREQ202400038	INFUSION PUMP CHARGE 1 DAY	1.00	1,100.00	₹ 1,100.00
GENERAL PROCEDURE					
04/04/2024	IPREQ202400038	CATHETERIZATION CHARGES	1.00	500.00	₹ 500.00
LABORATORY					
04/04/2024	IPREQ202400010	CBC	1.00	525.00	₹ 525.00
04/04/2024	IPREQ202400010	CREATININE	1.00	120.00	₹ 120.00
04/04/2024	IPREQ202400010	ELECTROLYTES	1.00	540.00	₹ 540.00
04/04/2024	IPREQ202400010	ESR	1.00	240.00	₹ 240.00
04/04/2024	IPREQ202400010	GLUCOSE (RANDOM)	1.00	60.00	₹ 60.00
04/04/2024	IPREQ202400010	HBSAG	1.00	300.00	₹ 300.00
04/04/2024	IPREQ202400010	HIV I & II	1.00	360.00	₹ 360.00
04/04/2024	IPREQ202400010	UREA	1.00	120.00	₹ 120.00
04/04/2024	IPREQ202400011	URINE PREGNANCY TEST	1.00	174.00	₹ 174.00
05/04/2024	IPREQ202400024	LIVER FUNCTION TEST	1.00	720.00	₹ 720.00
05/04/2024	IPREQ202400021	ELECTROLYTES	1.00	540.00	₹ 540.00
06/04/2024	IPREQ202400032	LIVER FUNCTION TEST	1.00	720.00	₹ 720.00

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Entity Type	:	**Self**	Ward Name	:	**SINGLE ROOM**
			Bed Name	:	**G-19**
Payment Type	:	**Cash**			

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MEDICAL RECORD CHARGE					
07/04/2024	IPREQ202400040	MEDICAL RECORD CHARGE	1.00	200.00	₹ 200.00
NURSING CHARGE					
04/04/2024		NURSING CHARGE - ICU	2.00	500.00	₹ 1,000.00
05/04/2024		NURSING CHARGE - SINGLE ROOM	2.00	500.00	₹ 1,000.00
OP REGISTRATION					
07/04/2024	IPREQ202400040	IP REGISTRATION CHARGES	1.00	200.00	₹ 200.00
PROFESSIONAL TEAM FEES					
04/04/2024	IPREQ202400038	PROFESSIONAL TEAM FEES (Dr.PARTHIBAN DURAISAMY)	2.00	750.00	₹ 1,500.00
04/04/2024	IPREQ202400038	PROFESSIONAL TEAM FEES (Dr.SARAVANAN)	2.00	1,200.00	₹ 2,400.00
05/04/2024	IPREQ202400038	PROFESSIONAL TEAM FEES (Dr.KANNAMMAL DURAISAMY)	2.00	850.00	₹ 1,700.00
06/04/2024	IPREQ202400025	PROFESSIONAL TEAM FEES (Dr.KANNAMMAL DURAISAMY)	1.00	600.00	₹ 600.00
07/04/2024	IPREQ202400039	PROFESSIONAL TEAM FEES (Dr.KANNAMMAL DURAISAMY)	2.00	650.00	₹ 1,300.00
07/04/2024	IPREQ202400039	PROFESSIONAL TEAM FEES (Dr.PARTHIBAN DURAISAMY)	1.00	750.00	₹ 750.00
RADIOLOGY					
04/04/2024	IPREQ202400010	CHEST PA VIEW	1.00	420.00	₹ 420.00
04/04/2024	IPREQ202400010	ECG - OP	1.00	200.00	₹ 200.00

Total	:	**₹33,289.00**
Advance Amount	:	**₹13,000.00**
Balance Amount	:	**₹20,289.00**