

IN PATIENT SUMMARY BILL

UHID : MMH202477157

IP No : IP2024001147

Patient name : Mr.M RAGHU

Age : 32 Y 0 M 13 D/Male

Consultant Name : Dr.GOWRI SHANKAR.M

Bill No : MMH/MH/IP202401184

Bill Date : 02/06/2024

DOA : 21/5/2024 2:30PM

DOD :

Entity Type : Corporate

Entity Name : GMONEY

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 2,750.00
3	DIET CHARGES	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 750.00
5	EQUIPMENT	₹ 3,500.00
6	INJECTION CHARGES	₹ 200.00
7	LABORATORY	₹ 1,782.00
8	NURSING CHARGE	₹ 800.00
9	OPERATION THEATRE CHARGES	₹ 9,850.00
10	OTHER ADDITION	₹ 9,803.00
11	PHARMACY CHARGE	₹ 7,577.00
12	PROFESSIONAL TEAM FEES	₹ 60,000.00
Gross Amount		₹ 97,862.00
Sanction Amount		₹ 96,112.00
Net Payable		₹ 97,862.00
Advance Amount		₹ 5,000.00
Received Amount		₹ 0.00
Refund Amount		₹ 3,250.00

Received Amount in Words : Five Thousand Only

KARTHICK.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	21/05/2024	MMH/MH/RECH2024018	CARD	Advance Amount	5,000.00

Medical Claim	Claim No	Sanction Amount
GMONEY	GMONEY	96,112.00