

In-Patient Bill (Summary) GSTIN:29AACCD7912K1ZD

I.P. No. : 23/15866 Bill No. : PROVISIONAL

Patient Name : Baby. MOHAMMED FARZAAN Run Date : 28/06/2023 13:11

UHID : 700828104 Age/Gender : 4 Mnth 15 Days/Male

Address : D.O.A : 16/06/2023 21:18

D.O.D :

Phone : SELF-ACMI Bed No/Ward : PICU -02/PICU

Payer Consultant : Dr. SANTHOSH N U (NEURO

SURGERY)

Sponsor : SELF-ACMI NetWork :

S#	Particulars	Gross Amt	Net Amt	Pat Amt	Payer Amt
1	REGISTRATION	1500.00	1500.00	1500.00	0.00
2	CONSULTATION	35500.00	35500.00	35500.00	0.00
3	BED CHARGES	24502.50	24502.50	24502.50	0.00
4	CRITICAL CARE UNIT CHARGES	88200.00	88200.00	88200.00	0.00
5	BLOOD BANK	9455.00	9455.00	9455.00	0.00
6	LAB SERVICES	93180.00	93180.00	93180.00	0.00
7	RADIOLOGY	77780.00	77780.00	77780.00	0.00
8	NON LAB SERVICES	5080.00	5080.00	5080.00	0.00
9	CLINICAL SUPPORT SERVICES	222730.00	222730.00	222730.00	0.00
10	PROCEDURE / SURGERY CHARGES	271522.00	271522.00	271522.00	0.00
		829449.50	829449.50	829449.50	0.00
11	Pharmacy & Consumable Items	194082.87	194082.87	194082.87	0.00
		194082.87	194082.87	194082.87	0.00
			Total Bill Amount		1023532.37
			Net Bill Amount		1023532.37
			Net Bill Amount (Incl. Tax)		1023532.00
			Patient Amount		1023532.00
			Payer Amount		0.00
			Amount Received(-)		0.00
			Amount To Be Received		1023532.00

Total Bill Amount In Words: INR Ten Lakh Twenty Three Thousand Five Hundred Thirty Two only

Note: This is an interim DRAFT itemised bill issued at the request customer (Patient). The charges are INDICATIVE and are not FINAL. The bill value would vary based on levying of charges for services rendered and reversal of unused items. This bill shall undergo a pre-discharge audit where reconciliation of charges rendered is done to reflect value accurately for bill settlement. As per existing billing protocol, Inpatient services are rendered first and then the charges are entered into the system, which then reflects in the bill and hence is not a 'real-time' updation. This is especially true for out-sourced services. in our efforts to maintain transparency, we are sharing itemised bills and any dispute should be discussed with the billing manager. Please do acknowledge having understood this and do contact our billing/finance for any further clarification"

Patient's Attendant's Signature Authorised Signatory

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For Appointment - 080-66040400

Venture