

C-4, Satyanarayan Society, Gor's Kuva, Jashodanagar Char Rasta, Maninagar (E), Ahmedabad
Phone : 25835830, M.: 9925047695 Fax : (079) 25835831

Case No. : A33000 / IPD No. : *12904 Date : 18/03/2020 04.47 pm
Name : KANTABEN B PATEL
Sex/Age : Female / 67 Years
Address : 38/shitalchaya soc arbhuda nagar
AHMEDABAD, ODHAV
Phone : M-9426386109

DISCHARGE SUMMARY

Date of Admission : 16/03/2020 Time : 11.00
Date of Discharge : 16/03/2020 Time : 2000

*** Diagnosis :**

RIGHT EYE AGE RELATED DENS CATARACT

*** Indoor Detail :**

FEMALE/KANTABEN CAME WITH C/C DOV IN RIGHT EYE SINCE 1 MONTH, NO OTHER OCCULAR OR SYSTEMIC HISTORY. RIGHT EYE SHOW GREY REFLEX.

*** Operative Details :**

Date of Operation : 16/03/2020

*** Operative Note :**

RIGHT EYE PHACO WITH FOLDABLE IOL

R_x

- 1) Eye Drop AP DROP PD (1)
2 DROP PER 3 HOURS5 days
- 2) Tab. PARACETAMAL (5)
.....5 days
- 3) Tab. LEVOGRA-500
ONE TABLET EVERY-NOON5 days

CASH A/C
Ahmedabad, Gujarat

Deep Joshi
SHIVAM HOSPITAL
Dr. DEEP JOSHI

M. S. Ophthal, FICO (Reg. No. G-22948)
C/4, Satyanarayan Society, Nr. Gor No Kuvo,
Maninagar East, AHMEDABAD-380 008.



ICU Diagnostic & Research Centre

Timings
Mon to Saturday
Evening 6.00 to 8.00

Dr. Deep Joshi
M.S. Ophthal
FICO (London)
Phaco & Glucoma

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TO, MEDI ASSIST TPA
BILL NO : 12904 / 2019-20
BILL DATE : 16/3/2020
INSURANCE CO: UNTED INDIA INSURANCE
A/C OF KANTABEN PATEL
DIAG: RIGHT EYE DENS AGE RELATED CATARACT

DOA:-16/3/2020 11:00 DOD :- 16-Mar-20 20:00PM

TOTAL DAYS :- 1 DAYS

CCN:

MA ID : 5023215591

SUBTOTALL BILL FOR CLAIM

FIRST CONSULTING CHARGE

0.00

DR CHARGE FOR(IMATURE CATARACT)OPEARATION

14000.00

INVESTIGATIONS CHARGES (BLOOD REPORTS)

0.00

LENS CHARGE

(ALL ORIGINAL BILL ARE ATTACHED)

10000.00

ECG CHARGES

0.00

ANESTHESIA CHARGE

0.00

A SCAN CHARGES

0.00

SUBTOTALL BILL FOR CLAIM

24000.00

10% MOU DISCOUNT

CO PAYMENT IF APPLICABLE

TOTAL BILL FOR CLAIM

24000.00

WE HAD NOT COLLECTED ANY AMOUNT FROM PT

PT SIGN:-

Signature

SHIVAM HOSPITAL
Dr. DEEP JOSHI
M. S. Ophthal, FICO (Reg. No. G-22948)
C/4, Satyanarayan Society, Gor's Kuva,
Maninagar East, AHMEDABAD-380 008.

A Name! - Kumbheshwar Patel

GSTIN No. : 24AASCA3660R1ZZ

DL No : GJ-ADC-128403/20B DT:04.06.2019
DL No : GJ-ADC-128404/21B DT:04.06.2019

APPASAMY ASSOCIATES PVT LTD

C-2/26, Kumbhnath Society, Nr, Avkar Hall, Ghodasar Road, Maninagar
Ahmedabad - 380008.

P.INVOICE

To

Dr. Shivam Hospital,
Ahmedabad.

S No : 2020/3993

Date : 16.03.2020

Ref Bill No. :

Order Date :

S.No.

Description of Goods

Qty.(No.)

Rate/Unit
Rs.

Amount

1.

Intra Ocular Lens,
-Non Supra Phob Lens.

1 No.

8,928.57/-

8,928.57

SGST 6%
CGST 6%

535.72
535.72

Rupees: Ten Thousand Only.

TOTAL

10,000.00

Terms & Conditions

1. All payments should be drawn infavour of M/s. Appasamy Associates. Payable at Chennai.
2. Company is not responsible for any Cash transaction with any of our staffs.
3. All disputes subject to Chennai jurisdiction.
4. Interest @ 18% per annum will be charged from the date of invoice if Payment is not made within the due date by the buyer or if the cheque is Dishonored.

FOR APPASAMY ASSOCIATES PVT LTD

Z. modarthi

Authorized Signatory

SHIVAM HOSPITAL
Dr. DEEPA JOSHI
M. S. Ophthal, FICO (Reg. No. G-22948)
C/4, Satyanarayan Society, Nr. Gor No Kuvo,
Maninagar East, AHMEDABAD-380 008.