



## SRI RAMAKRISHNA HEART FOUNDATION & RESEARCH CENTRE

### SRI RAMAKRISHNA HOSPITAL

(M/s. S.N.R. Sons Charitable Trust)

395, Sarojini Naidu Road, Coimbatore - 641 044

Phone : 4500105, 4500001, Dir : 2242775,

Fax : 0422-91-2240521

E-Mail : ramakrishnaheart@sancharnet.in

## DIVISION OF CARDIOVASCULAR SURGERY

Ref: SRHF/CVS/2010-11

Date: 10.12.2010

The San Diego Downtown Breakfast Rotary club,  
P.O Box 80336  
San Diego, CA-92138-0336.

Dear Sir,

### TOTAL AMOUNT OF THE ABOVE INVOICES:

S.No	Name Patient & Age	Bill amt. IN Rupees.
1.*	Baby.Parimalam	59,000.00
2.*	Mast.Mariappan	70,000.00
3.*	Baby.Ameena	59,000.00
4.*	Baby.Chandrakala	59,000.00
5.*	Baby.Dhanushree	59,000.00
6.*	Baby.Dharsini	59,000.00
7.*	Baby.Arbeena	70,000.00
8.*	Baby.Logeshwari	59,000.00
9.*	Baby.Bharath	59,000.00
	Total	5,53,000.00

*(Rupees five lakhs fifty three thousand only).*

Thanking You,  
Yours faithfully,

  
MOHANAKRISHNAN.L

CC : 1. Rtn.P.S.SRINIVASAN, DISTRICT DIRECTOR, ROTARY CLUB OF CBE SAICITY.  
2. Rtn.MPHF MARAPPAN.V – PRESIDENT, ROTARY CLUB OF CBE SAICITY.

**SRI RAMAKRISHNA HEART FOUNDATION & RESEARCH CENTRE****SRI RAMAKRISHNA HOSPITAL**

(M/s. S.N.R. Sons Charitable Trust)

395, Sarojini Naidu Road, Coimbatore - 641 044

Phone : 4500105, 4500001, Dir : 2242775,

Fax : 0422-91-2240521

E-Mail : ramakrishnaheart@sancharnet.in

**DIVISION OF CARDIOVASCULAR SURGERY**

Ref: SRHF/CVS/2010-11

Date: 10.12.2010

The San Diego Downtown Breakfast Rotary club,  
P.O Box 80336  
San Diego, CA-92138-0336.

Dear Sir,

This is the Invoice of the patient who had undergone Open Heart surgery.

S.No	Name Patient & Age	Do.Op. Oper'n	Name of Surgery	Total Package	Hospl Conces'n	Bill amt. IN Rupees.
1.	BABY PARIMALAM.K 4 ½ YEARS	14.10.10	VSD closure	64,000/-	5,000/-	59,000.00
	Total					59,000.00

*(Rupees Fifty nine thousand only).*

Thanking You,  
Yours faithfully,

MOHANAKRISHNAN.L

CC : 1. Rtn.P.S.SRINIVASAN, DISTRICT DIRECTOR, ROTARY CLUB OF CBE SAICITY.  
2. Rtn.MPHF MARAPPAN.V – PRESIDENT, ROTARY CLUB OF CBE SAICITY.

**SRI RAMAKRISHNA HEART FOUNDATION AND RESEARCH CENTRE,**  
**SRI RAMAKRISHNA HOSPITAL,**  
**COIMBATORE.**

**PACKAGE CHARGES FOR ASD, VSD CLOSURE.**

**DETAILS OF PACKAGE CHARGES: Rs.64,000/-.**

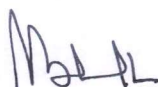
SURGICAL MATERIALS	= Rs.20,500.00
ANAESTHESIA DISPOSABLES & DRUGS	= Rs. 7,500.00
THEATRE CHARGES	= Rs. 9,000.00
ICU CHARGES (INCLUSIVE OF MONI- TORS, VENTILATORS, & PUMPS FOR 3 DAYS)	
{ ICU charges Rs.1000/- per day for 3 days}	= Rs. 3,000.00
{ Monitors, Ventilators, Syringe pump charges}	= Rs. 4,000.00
BLOOD INVESTIGATIONS (PREOP & POST OP)	= Rs. 5,000.00
DRUGS & INFUSIONS	= Rs. 5,000.00
NURSING CHARGES	= Rs. 4,000.00
(Certified that special Nursing was essential for the treatment of the patient)	
PROFESSIONAL FEES	= Rs. 4,000.00
BED CHARGES FOR 10 DAYS	= Rs. 2,000.00
	-----
TOTAL AMOUNT	= Rs.64,000.00
Less: hospital concession	- Rs. 5,000.00
	-----
Bill amount	= Rs.59,000.00
	=====

**(Rupees Fifty nine thousand only).**

With regards

Dr.Mohanakrishnan.L.

Chief Cardiovascular Surgeon.



Dr. MOHANAKRISHNAN L, MS, Mch.  
CHIEF CARDIOVASCULAR SURGEON  
REGN No. 34332.

SRI RAMAKRISHNA HEART FOUNDATION  
AND RESEARCH CENTRE  
SRI RAMAKRISHNA HOSPITAL  
395-SAROJINI NAIDU ROAD, COIMBATORE-641 044.  
PHONE : 0422 - 4500000, 2242775.





## SRI RAMAKRISHNA HEART FOUNDATION & RESEARCH CENTRE

### SRI RAMAKRISHNA HOSPITAL

(M/s. S.N.R. Sons Charitable Trust)  
395, Sarojini Naidu Road, Coimbatore - 641 044  
Phone : 4500105, 4500001, Dir : 2242775,  
Fax : 0422-91-2240521  
E-Mail : ramakrishnaheart@sancharnet.in

## DIVISION OF CARDIOVASCULAR SURGERY

Ref: SRHF/CVS/2010-11

Date: 10.12.2010

The San Diego Downtown Breakfast Rotary club,  
P.O Box 80336  
San Diego, CA-92138-0336.

Dear Sir,

This is the Invoice of the patient who had undergone Open Heart surgery.

S.No	Name Patient & Age	Do.Op. Oper'n	Name of Surgery	Total Package	Hospl Conces'n	Bill amt. IN Rupees.
2.	MAST.MARIAPPAN 6YEARS	20.10.10	VSD closure + DCRV -> ICR	75,000/-	5,000/-	70,000.00
	Total					70,000.00

(Rupees Seventy thousand only).

Thanking You,  
Yours faithfully,

MOHANAKRISHNAN.L

CC : 1. Rtn.P.S.SRINIVASAN, DISTRICT DIRECTOR, ROTARY CLUB OF CBE SAICITY.  
2. Rtn.MPHF MARAPPAN.V – PRESIDENT, ROTARY CLUB OF CBE SAICITY.

**SRI RAMAKRISHNA HEART FOUNDATION AND RESEARCH CENTRE,**  
**SRI RAMAKRISHNA HOSPITAL,**  
**COIMBATORE.**

**PACKAGE CHARGES FOR INTRA CARDIAC REPAIR – TOF.**  
**DETAILS OF PACKAGE CHARGES: Rs.75,000/-.**

SURGICAL MATERIALS	= Rs.25,500.00
ANAESTHESIA DISPOSABLES & DRUGS	= Rs. 8,500.00
THEATRE CHARGES	= Rs. 10,000.00
ICU CHARGES (INCLUSIVE OF MONI- TORS, VENTILATORS, & PUMPS FOR 3 DAYS) { ICU charges Rs.1000/- per day for 3 days} = Rs.3,000.00 { Monitors, Ventilators, Syringe pump charges} = Rs.5,000.00	
BLOOD INVESTIGATIONS (PREOP & POST OP)	= Rs. 5,000.00
DRUGS & INFUSIONS	= Rs. 6,000.00
NURSING CHARGES (Certified that special Nursing was essential for the treatment of the patient)	= Rs. 5,000.00
PROFESSIONAL FEES	= Rs. 5,000.00
BED CHARGES FOR 10 DAYS	= Rs. 2,000.00
TOTAL AMOUNT	= Rs.75,000.00
Less: hospital concession	- Rs. 5,000.00
Bill amount	= Rs.70,000.00

**(Rupees Seventy thousand only).**

With regards  
Dr. Mohanakrishnan.L.  
Chief Cardiovascular Surgeon.



Dr. MOHANAKRISHNAN L, MS, Mch.  
CHIEF CARDIOVASCULAR SURGEON  
REGN No. 34332.  
SRI RAMAKRISHNA HEART FOUNDATION  
AND RESEARCH CENTRE  
SRI RAMAKRISHNA HOSPITAL  
395 - SAROJINI NAIDU ROAD, COIMBATORE - 641 044.  
PHONE : 0422 - 4500000, 2242775.

**SRI RAMAKRISHNA HEART FOUNDATION & RESEARCH CENTRE****SRI RAMAKRISHNA HOSPITAL**

(M/s. S.N.R. Sons Charitable Trust)

395, Sarojini Naidu Road, Coimbatore - 641 044

Phone : 4500105, 4500001, Dir : 2242775,

Fax : 0422-91-2240521

E-Mail : ramakrishnaheart@sancharnet.in

**DIVISION OF CARDIOVASCULAR SURGERY**

Ref: SRHF/CVS/2010-11

Date: 10.12.2010

The San Diego Downtown Breakfast Rotary club,  
P.O Box 80336  
San Diego, CA-92138-0336.

Dear Sir,

This is the Invoice of the patient who had undergone Open Heart surgery.

S.No	Name Patient & Age	Do.Op. Oper'n	Name of Surgery	Total Package	Hospl Conces'n	Bill amt. IN Rupees.
3.	BABY.AMEENA 4YEARS	25.10.10	ASD closure	64,000/-	5,000/-	59,000.00
	Total					59,000.00

*(Rupees Fifty nine thousand only).*

Thanking You,  
Yours faithfully,

MOHANAKRISHNAN.L

CC : 1. Rtn.P.S.SRINIVASAN, DISTRICT DIRECTOR, ROTARY CLUB OF CBE SAICITY.  
2. Rtn.MPHF MARAPPAN.V – PRESIDENT, ROTARY CLUB OF CBE SAICITY.

**SRI RAMAKRISHNA HEART FOUNDATION AND RESEARCH CENTRE,**  
**SRI RAMAKRISHNA HOSPITAL,**  
**COIMBATORE.**

**PACKAGE CHARGES FOR ASD, VSD CLOSURE.**

**DETAILS OF PACKAGE CHARGES: Rs.64,000/-.**

SURGICAL MATERIALS	= Rs.20,500.00
ANAESTHESIA DISPOSABLES & DRUGS	= Rs. 7,500.00
THEATRE CHARGES	= Rs. 9,000.00
ICU CHARGES (INCLUSIVE OF MONI- TORS, VENTILATORS, & PUMPS FOR 3 DAYS)	
{ ICU charges Rs.1000/- per day for 3 days}	= Rs. 3,000.00
{Monitors,Ventilators,Syringe pump charges}	=Rs. 4,000.00
BLOOD INVESTIGATIONS (PREOP & POST OP)	= Rs. 5,000.00
DRUGS & INFUSIONS	= Rs. 5,000.00
NURSING CHARGES	= Rs. 4,000.00
(Certified that special Nursing was essential for the treatment of the patient)	
PROFESSIONAL FEES	= Rs. 4,000.00
BED CHARGES FOR 10 DAYS	= Rs. 2,000.00
	-----
TOTAL AMOUNT	= Rs.64,000.00
Less: hospital concession	- Rs. 5,000.00
	-----
Bill amount	= Rs.59,000.00
	=====

**(Rupees Fifty nine thousand only).**

**With regards**  
**Dr.Mohanakrishnan.L.**  
**Chief Cardiovascular Surgeon.**

Dr. MOHANAKRISHNAN L, MS, Mch.  
CHIEF CARDIOVASCULAR SURGEON  
REGN No. 34332.  
SRI RAMAKRISHNA HEART FOUNDATION  
AND RESEARCH CENTRE  
SRI RAMAKRISHNA HOSPITAL  
395 - SAROJINI NAIDU ROAD, COIMBATORE-641 044.  
PHONE : 0422 - 4500000, 2242775.





## SRI RAMAKRISHNA HEART FOUNDATION & RESEARCH CENTRE

### SRI RAMAKRISHNA HOSPITAL

(M/s. S.N.R. Sons Charitable Trust)

395, Sarojini Naidu Road, Coimbatore - 641 044

Phone : 4500105, 4500001, Dir : 2242775,

Fax : 0422-91-2240521

E-Mail : ramakrishnaheart@sancharnet.in

### DIVISION OF CARDIOVASCULAR SURGERY

Ref: SRHF/ CVS/2010-11

Date: 10.12.2010

The San Diego Downtown Breakfast Rotary club,

P.O Box 80336

San Diego, CA-92138-0336.

Dear Sir,

This is the Invoice of the patient who had undergone Open Heart surgery.

S.No	Name Patient & Age	Do.Op. Oper'n	Name of Surgery	Total Package	Hospl Conces'n	Bill amt. IN Rupees.
3. 4.	BABY.CHANDRAKALA 9YEARS	01.11.10	ASD closure	64,000/-	5,000/-	59,000.00
	Total					59,000.00

(Rupees Fifty nine thousand only).

Thanking You,  
Yours faithfully,

MOHANAKRISHNAN.L

CC : 1. Rtn.P.S.SRINIVASAN, DISTRICT DIRECTOR, ROTARY CLUB OF CBE SAICITY.  
2. Rtn.MPHF MARAPPAN.V – PRESIDENT, ROTARY CLUB OF CBE SAICITY.



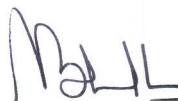
**SRI RAMAKRISHNA HEART FOUNDATION AND RESEARCH CENTRE,**  
**SRI RAMAKRISHNA HOSPITAL,**  
**COIMBATORE.**

**PACKAGE CHARGES FOR ASD, VSD CLOSURE.**  
**DETAILS OF PACKAGE CHARGES: Rs.64,000/-.**

SURGICAL MATERIALS	= Rs.20,500.00
ANAESTHESIA DISPOSABLES & DRUGS	= Rs. 7,500.00
THEATRE CHARGES	= Rs. 9,000.00
ICU CHARGES (INCLUSIVE OF MONI- TORS, VENTILATORS, & PUMPS FOR 3 DAYS) { ICU charges Rs.1000/- per day for 3 days} = Rs. 3,000.00 { Monitors, Ventilators, Syringe pump charges} = Rs. 4,000.00	
BLOOD INVESTIGATIONS (PREOP & POST OP)	= Rs. 5,000.00
DRUGS & INFUSIONS	= Rs. 5,000.00
NURSING CHARGES (Certified that special Nursing was essential for the treatment of the patient)	= Rs. 4,000.00
PROFESSIONAL FEES	= Rs. 4,000.00
BED CHARGES FOR 10 DAYS	= Rs. 2,000.00
TOTAL AMOUNT	= Rs.64,000.00
Less: hospital concession	- Rs. 5,000.00
Bill amount	= Rs.59,000.00

**(Rupees Fifty nine thousand only).**

With regards  
Dr. Mohanakrishnan.L.  
Chief Cardiovascular Surgeon.



Dr. MOHANAKRISHNAN L, MS, Mch.  
CHIEF CARDIOVASCULAR SURGEON  
REGN No. 34332.  
SRI RAMAKRISHNA HEART FOUNDATION  
AND RESEARCH CENTRE  
SRI RAMAKRISHNA HOSPITAL  
395-SAROJINI NAIDU ROAD, COIMBATORE-641 044.  
PHONE : 0422 - 4500000, 2242775.



## SRI RAMAKRISHNA HEART FOUNDATION & RESEARCH CENTRE

### SRI RAMAKRISHNA HOSPITAL

(M/s. S.N.R. Sons Charitable Trust)

395, Sarojini Naidu Road, Coimbatore - 641 044

Phone : 4500105, 4500001, Dir : 2242775,

Fax : 0422-91-2240521

E-Mail : ramakrishnaheart@sancharnet.in

## DIVISION OF CARDIOVASCULAR SURGERY

Ref: SRHF/CVS/2010-11

Date: 10.12.2010

The San Diego Downtown Breakfast Rotary club,  
P.O Box 80336  
San Diego, CA-92138-0336.

Dear Sir,

This is the Invoice of the patient who had undergone Open Heart surgery.

S.No	Name Patient & Age	Do.Op. Oper'n	Name of Surgery	Total Package	Hospl Conces'n	Bill amt. IN Rupees.
1.7	BABY.J.ARBEENA 4 Months	15.11.10	VSD closure + ASD closure.	75,000/-	5,000/-	70,000.00
	Total					70,000.00

*(Rupees Seventy thousand only).*

Thanking You,  
Yours faithfully,

MOHANAKRISHNAN.L

CC : 1. Rtn.P.S.SRINIVASAN, DISTRICT DIRECTOR, ROTARY CLUB OF CBE SAICITY.  
2. Rtn.MPHF MARAPPAN.V – PRESIDENT, ROTARY CLUB OF CBE SAICITY.

**SRI RAMAKRISHNA HEART FOUNDATION AND RESEARCH CENTRE,**  
**SRI RAMAKRISHNA HOSPITAL,**  
**COIMBATORE.**

**PACKAGE CHARGES FOR INTRA CARDIAC REPAIR – TOF.**  
**DETAILS OF PACKAGE CHARGES: Rs.75,000/-.**

SURGICAL MATERIALS	= Rs.25,500.00
ANAESTHESIA DISPOSABLES & DRUGS	= Rs. 8,500.00
THEATRE CHARGES	= Rs. 10,000.00
ICU CHARGES (INCLUSIVE OF MONI- TORS, VENTILATORS, & PUMPS FOR 3 DAYS) { ICU charges Rs.1000/- per day for 3 days} = Rs.3,000.00 {Monitors, Ventilators, Syringe pump charges}=Rs.5,000.00	
BLOOD INVESTIGATIONS (PREOP & POST OP)	= Rs. 5,000.00
DRUGS & INFUSIONS	= Rs. 6,000.00
NURSING CHARGES (Certified that special Nursing was essential for the treatment of the patient)	= Rs. 5,000.00
PROFESSIONAL FEES	= Rs. 5,000.00
BED CHARGES FOR 10 DAYS	= Rs. 2,000.00
TOTAL AMOUNT	= <b>Rs.75,000.00</b>
Less: hospital concession	- <b>Rs. 5,000.00</b>
Bill amount	= <b>Rs.70,000.00</b>

**(Rupees Seventy thousand only).**

With regards  
Dr.Mohanakrishnan.L.  
Chief Cardiovascular Surgeon.



Dr. MOHANAKRISHNAN L, MS, Mch.  
CHIEF CARDIOVASCULAR SURGEON  
REGN No. 34332.  
SRI RAMAKRISHNA HEART FOUNDATION  
AND RESEARCH CENTRE  
SRI RAMAKRISHNA HOSPITAL  
395-SAROJINI NAIDU ROAD, COIMBATORE-641 044.  
PHONE : 0422 - 4500000, 2242775.



**SRI RAMAKRISHNA HEART FOUNDATION & RESEARCH CENTRE****SRI RAMAKRISHNA HOSPITAL**

(M/s. S.N.R. Sons Charitable Trust)

395, Sarojini Naidu Road, Coimbatore - 641 044

Phone : 4500105, 4500001, Dir : 2242775,

Fax : 0422-91-2240521

E-Mail : ramakrishnaheart@sancharnet.in

**DIVISION OF CARDIOVASCULAR SURGERY**

Ref: SRHF/CVS/2010-11

Date: 10.12.2010

The San Diego Downtown Breakfast Rotary club,

P.O Box 80336

San Diego, CA-92138-0336.

Dear Sir,

This is the Invoice of the patient who had undergone Open Heart surgery.

S.No	Name Patient & Age	Do.Op. Oper'n	Name of Surgery	Total Package	Hospl Conces'n	Bill amt. IN Rupees.
0.	BABY.BHARATH 5YEARS	02.12.10	VSD closure	64,000/-	5,000/-	59,000.00
	Total					59,000.00

(Rupees Fifty nine thousand only).

Thanking You,  
Yours faithfully,

MOHANAKRISHNAN.L

CC : 1. Rtn.P.S.SRINIVASAN, DISTRICT DIRECTOR, ROTARY CLUB OF CBE SAICITY.  
2. Rtn.MPHF MARAPPAN.V – PRESIDENT, ROTARY CLUB OF CBE SAICITY.

**SRI RAMAKRISHNA HEART FOUNDATION AND RESEARCH CENTRE,**  
**SRI RAMAKRISHNA HOSPITAL,**  
**COIMBATORE.**

**PACKAGE CHARGES FOR ASD, VSD CLOSURE.**

**DETAILS OF PACKAGE CHARGES: Rs.64,000/-.**

SURGICAL MATERIALS	= Rs.20,500.00
ANAESTHESIA DISPOSABLES & DRUGS	= Rs. 7,500.00
THEATRE CHARGES	= Rs. 9,000.00
ICU CHARGES (INCLUSIVE OF MONI- TORS, VENTILATORS, & PUMPS FOR 3 DAYS)	
{ ICU charges Rs.1000/- per day for 3 days }	= Rs. 3,000.00
{ Monitors, Ventilators, Syringe pump charges }	= Rs. 4,000.00
BLOOD INVESTIGATIONS (PREOP & POST OP)	= Rs. 5,000.00
DRUGS & INFUSIONS	= Rs. 5,000.00
NURSING CHARGES	= Rs. 4,000.00
(Certified that special Nursing was essential for the treatment of the patient)	
PROFESSIONAL FEES	= Rs. 4,000.00
BED CHARGES FOR 10 DAYS	= Rs. 2,000.00
TOTAL AMOUNT	= Rs.64,000.00
Less: hospital concession	- Rs. 5,000.00
Bill amount	= Rs.59,000.00

**(Rupees Fifty nine thousand only).**

With regards  
Dr. Mohanakrishnan.L.  
Chief Cardiovascular Surgeon.



Dr. MOHANAKRISHNAN L, MS, Mch.  
CHIEF CARDIOVASCULAR SURGEON  
REGN No. 34332.  
SRI RAMAKRISHNA HEART FOUNDATION  
AND RESEARCH CENTRE  
SRI RAMAKRISHNA HOSPITAL  
395 - SAROJINI NAIDU ROAD, COIMBATORE-641 044.  
PHONE : 0422 - 4500000, 2242775.



## SRI RAMAKRISHNA HEART FOUNDATION & RESEARCH CENTRE

### SRI RAMAKRISHNA HOSPITAL

(M/s. S.N.R. Sons Charitable Trust)

395, Sarojini Naidu Road, Coimbatore - 641 044

Phone : 4500105, 4500001, Dir : 2242775,

Fax : 0422-91-2240521

E-Mail : ramakrishnaheart@sancharnet.in

### DIVISION OF CARDIOVASCULAR SURGERY

Ref: SRHF/CVS/2010-11

Date: 10.12.2010

The San Diego Downtown Breakfast Rotary club,

P.O Box 80336

San Diego, CA-92138-0336.

Dear Sir,

This is the Invoice of the patient who had undergone Open Heart surgery.

S.No	Name Patient & Age	Do.Op. Oper'n	Name of Surgery	Total Package	Hospl Conces'n	Bill amt. IN Rupees.
8.	BABY.V.LOGESHWARI 7YEARS	18.11.10	VSD closure	64,000/-	5,000/-	59,000.00
	Total					59,000.00

(Rupees Fifty nine thousand only).

Thanking You,  
Yours faithfully,

MOHANAKRISHNAN.L

CC : 1. Rtn.P.S.SRINIVASAN, DISTRICT DIRECTOR, ROTARY CLUB OF CBE SAICITY.  
2. Rtn.MPHF MARAPPAN.V – PRESIDENT, ROTARY CLUB OF CBE SAICITY.



**SRI RAMAKRISHNA HEART FOUNDATION AND RESEARCH CENTRE,**  
**SRI RAMAKRISHNA HOSPITAL,**  
**COIMBATORE.**

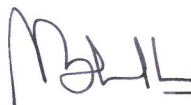
**PACKAGE CHARGES FOR ASD, VSD CLOSURE.**

**DETAILS OF PACKAGE CHARGES: Rs.64,000/-.**

SURGICAL MATERIALS	= Rs.20,500.00
ANAESTHESIA DISPOSABLES & DRUGS	= Rs. 7,500.00
THEATRE CHARGES	= Rs. 9,000.00
ICU CHARGES (INCLUSIVE OF MONI- TORS, VENTILATORS, & PUMPS FOR 3 DAYS)	
{ ICU charges Rs.1000/- per day for 3 days}	= Rs. 3,000.00
{ Monitors, Ventilators, Syringe pump charges}	= Rs. 4,000.00
BLOOD INVESTIGATIONS (PREOP & POST OP)	= Rs. 5,000.00
DRUGS & INFUSIONS	= Rs. 5,000.00
NURSING CHARGES	= Rs. 4,000.00
(Certified that special Nursing was essential for the treatment of the patient)	
PROFESSIONAL FEES	= Rs. 4,000.00
BED CHARGES FOR 10 DAYS	= Rs. 2,000.00
TOTAL AMOUNT	= Rs.64,000.00
Less: hospital concession	- Rs. 5,000.00
Bill amount	= Rs.59,000.00

**(Rupees Fifty nine thousand only).**

With regards  
Dr.Mohanakrishnan.L.  
Chief Cardiovascular Surgeon.



Dr. MOHANAKRISHNAN L, MS, Mch.  
CHIEF CARDIOVASCULAR SURGEON  
REGN No. 34332.  
SRI RAMAKRISHNA HEART FOUNDATION  
AND RESEARCH CENTRE  
SRI RAMAKRISHNA HOSPITAL  
395-SAROJINI NAIDU ROAD, COIMBATORE-641 044.  
PHONE : 0422 - 4500000, 2242775.

**SRI RAMAKRISHNA HEART FOUNDATION & RESEARCH CENTRE****SRI RAMAKRISHNA HOSPITAL**

(M/s. S.N.R. Sons Charitable Trust)

395, Sarojini Naidu Road, Coimbatore - 641 044

Phone : 4500105, 4500001, Dir : 2242775,

Fax : 0422-91-2240521

E-Mail : ramakrishnaheart@sancharnet.in

**DIVISION OF CARDIOVASCULAR SURGERY**

Ref: SRHF/CVS/2010-11

Date: 10.12.2010

The San Diego Downtown Breakfast Rotary club,  
P.O Box 80336  
San Diego, CA-92138-0336.

Dear Sir,

This is the Invoice of the patient who had undergone Open Heart surgery.

S.No	Name Patient & Age	Do.Op. Oper'n	Name of Surgery	Total Package	Hospl Conces'n	Bill amt. IN Rupees.
6	BABY.S.DHANUSHREE 9 MONTHS	09.11.10	VSD closure	64,000/-	5,000/-	59,000.00
	Total					59,000.00

*(Rupees Fifty nine thousand only).*

Thanking You,  
Yours faithfully,

MOHANAKRISHNAN.L

CC : 1. Rtn.P.S.SRINIVASAN, DISTRICT DIRECTOR, ROTARY CLUB OF CBE SAICITY.  
2. Rtn.MPHF MARAPPAN.V – PRESIDENT, ROTARY CLUB OF CBE SAICITY.

**SRI RAMAKRISHNA HEART FOUNDATION AND RESEARCH CENTRE,**  
**SRI RAMAKRISHNA HOSPITAL,**  
**COIMBATORE.**

**PACKAGE CHARGES FOR ASD, VSD CLOSURE.**  
**DETAILS OF PACKAGE CHARGES: Rs.64,000/-.**

SURGICAL MATERIALS	= Rs.20,500.00
ANAESTHESIA DISPOSABLES & DRUGS	= Rs. 7,500.00
THEATRE CHARGES	= Rs. 9,000.00
ICU CHARGES (INCLUSIVE OF MONI- TORS, VENTILATORS, & PUMPS FOR 3 DAYS) { ICU charges Rs.1000/- per day for 3 days } = Rs. 3,000.00 { Monitors, Ventilators, Syringe pump charges } = Rs. 4,000.00	
BLOOD INVESTIGATIONS (PREOP & POST OP)	= Rs. 5,000.00
DRUGS & INFUSIONS	= Rs. 5,000.00
NURSING CHARGES (Certified that special Nursing was essential for the treatment of the patient)	= Rs. 4,000.00
PROFESSIONAL FEES	= Rs. 4,000.00
BED CHARGES FOR 10 DAYS	= Rs. 2,000.00
TOTAL AMOUNT	= Rs.64,000.00
Less: hospital concession	- Rs. 5,000.00
Bill amount	= Rs.59,000.00

**(Rupees Fifty nine thousand only).**

With regards  
Dr. Mohanakrishnan.L.  
Chief Cardiovascular Surgeon.



Dr. MOHANAKRISHNAN L, MS, Mch.  
CHIEF CARDIOVASCULAR SURGEON  
REGN No. 34332.  
SRI RAMAKRISHNA HEART FOUNDATION  
AND RESEARCH CENTRE  
SRI RAMAKRISHNA HOSPITAL  
395-SAROJINI NAIDU ROAD, COIMBATORE-641 044.  
PHONE : 0422 - 4500000, 2242775.





## SRI RAMAKRISHNA HEART FOUNDATION & RESEARCH CENTRE

### SRI RAMAKRISHNA HOSPITAL

(M/s. S.N.R. Sons Charitable Trust)

395, Sarojini Naidu Road, Coimbatore - 641 044

Phone : 4500105, 4500001, Dir : 2242775,

Fax : 0422-91-2240521

E-Mail : ramakrishnaheart@sancharnet.in

### DIVISION OF CARDIOVASCULAR SURGERY

Ref: SRHF/CVS/2010-11

Date: 10.12.2010

The San Diego Downtown Breakfast Rotary club,  
P.O Box 80336  
San Diego, CA-92138-0336.

Dear Sir,

This is the Invoice of the patient who had undergone Open Heart surgery.

S.No	Name Patient & Age	Do.Op. Oper'n	Name of Surgery	Total Package	Hospl Conces'n	Bill amt. IN Rupees.
6.	BABY.DHARSINI 3YEARS	11.11.10	VSD closure	64,000/-	5,000/-	59,000.00
	Total					59,000.00

*(Rupees Fifty nine thousand only).*

Thanking You,  
Yours faithfully,

MOHANAKRISHNAN.L

CC : 1. Rtn.P.S.SRINIVASAN, DISTRICT DIRECTOR, ROTARY CLUB OF CBE SAICITY.  
2. Rtn.MPHF MARAPPAN.V – PRESIDENT, ROTARY CLUB OF CBE SAICITY.

**SRI RAMAKRISHNA HEART FOUNDATION AND RESEARCH CENTRE,**  
**SRI RAMAKRISHNA HOSPITAL,**  
**COIMBATORE.**

**PACKAGE CHARGES FOR ASD, VSD CLOSURE.**

**DETAILS OF PACKAGE CHARGES: Rs.64,000/-.**

SURGICAL MATERIALS = Rs.20,500.00

ANAESTHESIA DISPOSABLES &  
DRUGS = Rs. 7,500.00

THEATRE CHARGES = Rs. 9,000.00

ICU CHARGES (INCLUSIVE OF MONI-  
TORS, VENTILATORS, & PUMPS FOR  
3 DAYS)  
{ ICU charges Rs.1000/- per day for 3 days } = Rs. 3,000.00  
{ Monitors, Ventilators, Syringe pump charges } = Rs. 4,000.00

BLOOD INVESTIGATIONS (PREOP &  
POST OP) = Rs. 5,000.00

DRUGS & INFUSIONS = Rs. 5,000.00

NURSING CHARGES = Rs. 4,000.00

(Certified that special Nursing was essential  
for the treatment of the patient)

PROFESSIONAL FEES = Rs. 4,000.00

BED CHARGES FOR 10 DAYS = Rs. 2,000.00

TOTAL AMOUNT = **Rs.64,000.00**

Less: hospital concession - **Rs. 5,000.00**

**Bill amount = Rs.59,000.00**

**(Rupees Fifty nine thousand only).**

With regards  
**Dr.Mohanakrishnan.L.**  
**Chief Cardiovascular Surgeon.**



Dr. MOHANAKRISHNAN L, MS, Mch.  
CHIEF CARDIOVASCULAR SURGEON  
REGN No. 34332.  
SRI RAMAKRISHNA HEART FOUNDATION  
AND RESEARCH CENTRE  
SRI RAMAKRISHNA HOSPITAL  
395 - SAROJINI NAIDU ROAD, COIMBATORE - 641 044.  
PHONE : 0422 - 4500000, 2242775.