

IN PATIENT SUMMARY BILL

UHID : MH00466

IP No : IP2024000766

Patient name : Mrs.LALITHA.V

Age : 81 Y 5 M 24 D/Female

Bill No : MMH/MH/IP202400797

Bill Date : 12/04/2024

DOA : 2/4/2024 10:58AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ACCOMMODATION	₹ 17,325.00
2	ADMINISTRATION CHARGES	₹ 350.00
3	BED CHARGES	₹ 60,900.00
4	DIET CHARGES	₹ 5,500.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 5,250.00
6	EQUIPMENT	₹ 21,750.00
7	GENERAL PROCEDURE	₹ 950.00
8	INJECTION CHARGES	₹ 200.00
9	INTENSIVIST CHARGES	₹ 10,500.00
10	LABORATORY	₹ 18,634.00
11	NURSING CHARGE	₹ 12,600.00
12	OPERATION THEATRE CHARGES	₹ 56,350.00
13	PHYSIOTHERAPY	₹ 8,900.00
14	PROFESSIONAL TEAM FEES	₹ 170,000.00
15	RADIOLOGY	₹ 32,290.00
Gross Amount		₹ 421,499.00
Net Payable		₹ 421,499.00
Advance Amount		₹ 215,000.00
Received Amount		₹ 206,499.00

Received Amount in Words : Four Lakh Twenty-One Thousand Four Hundred Ninety-Nine Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	02/04/2024	MMH/MH/RECH20240115	CARD	Advance Amount	30,000.00
2	04/04/2024	MMH/MH/RECH20240125	CARD	Advance Amount	50,000.00
3	06/04/2024	MMH/MH/RECH20240125	CARD	Advance Amount	60,000.00
4	12/04/2024	MMH/MH/RECH20240135	NEFT	Advance Amount	75,000.00
5	12/04/2024	MMH/MH/REDH2024078	CARD	Collected Amount	100,000.00
6	12/04/2024	MMH/MH/REDH2024078	NEFT	Collected Amount	106,499.00