

IN PATIENT SUMMARY BILL

UHID : MH01236

IP No : IP2024001362

Patient name : Mrs.SUSILA S

Age : 76 Y 0 M 3 D/Female

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401317

Bill Date : 21/06/2024

DOA : 18/6/2024 12:56PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 17,325.00
3	DIET CHARGES	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 2,625.00
5	EQUIPMENT	₹ 6,600.00
6	LABORATORY	₹ 16,013.00
7	NURSING CHARGE	₹ 2,800.00
8	PROFESSIONAL TEAM FEES	₹ 2,200.00
9	RADIOLOGY	₹ 13,400.00
Gross Amount		₹ 61,813.00
Net Payable		₹ 61,813.00
Advance Amount		₹ 40,000.00
Received Amount		₹ 21,813.00

Received Amount in Words : Sixty-One Thousand Eight Hundred Thirteen Only

SATHISH KUMAR.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/20/2024	MMH/MH/RECH202402275	CASH	Advance Amount	40,000.00
2	6/21/2024	MMH/MH/REDH202413329	CHEQUE	Collected Amount	1,862.00
3	6/21/2024	MMH/MH/REDH202413330	CASH	Collected Amount	19,951.00