## IN PATIENT SUMMARY BILL

UHID : MH23476 : MMH/MH/IP202401236 Bill No

: 10/06/2024 : IP2024001275 Bill Date IP No

Patient name : Ms.PANKAJAM S : 5/6/2024 8:46PM DOA

DOD : 74 Y 0 M 5 D/Female Age

: CASH Entity Type

: CASH Entity Name

Consultant Name : Dr.ARUN KUMAR.I

Amo			Description	S.No
350	₹		ADMINISTRATION CHARGES	1
24,750	₹		BED CHARGES	2
3,550	₹		DIET CHARGES	3
3,750	₹		DUTY MEDICAL OFFICER CHARGE	4
500	₹		GENERAL PROCEDURE	5
9,684	₹		LABORATORY	6
14,500	₹		NURSING CHARGE	7
10,050	₹		OPERATION THEATRE CHARGES	8
4,200	₹		PHYSIOTHERAPY	9
52,000	₹		PROFESSIONAL TEAM FEES	10
4,200	₹		RADIOLOGY	11
1,000	₹		TRANSPORT	12
128,53	₹	Gross Amount		
128,53	₹	Net Payable		
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**Advance Amount** ₹ 20,000.00 **Received Amount** ₹ 108,534.00

**Received Amount in Words** : One Lakh Twenty-Eight Thousand Five Hundred KARTHICK.S Thirty-Four Only **Authorised Signature** 

**Payment History** 

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/5/2024	MMH/MH/RECH202402084	CARD	Advance Amount	15,000.00
2	6/5/2024	MMH/MH/RECH202402085	CASH	Advance Amount	5,000.00
3	6/10/2024	MMH/MH/REDH202412444	CARD	Collected Amount	108,534.00