

**IN PATIENT SUMMARY BILL**

UHID : MH24338  
IP No : IP2023002759  
Patient name : Mr.VENKATARAMAN R  
Age : 78 Y 0 M 2 D/Male

Bill No : MMH/MH/IP00191  
Bill Date : 21/12/2023  
DOA : 19/12/2023 1:24PM  
DOD :  
Entity Type : CASH  
Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 9,900.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,400.00
4	EQUIPMENT	₹ 3,000.00
5	INJECTION CHARGES	₹ 200.00
6	LABORATORY	₹ 5,883.00
7	NURSING CHARGE	₹ 1,500.00
8	OPERATION THEATRE CHARGES	₹ 3,500.00
9	PROFESSIONAL TEAM FEES	₹ 13,000.00
10	RADIOLOGY	₹ 3,000.00
<b>Gross Amount</b>		₹ <b>41,733.00</b>
<b>Net Payable</b>		₹ <b>41,733.00</b>
<b>Advance Amount</b>		₹ <b>10,000.00</b>
<b>Received Amount</b>		₹ <b>31,733.00</b>

**Received Amount in Words** : Forty-One Thousand Seven Hundred  
Thirty-Three Only

DINESH  
**Authorised Signature**

**Payment History**

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	19/12/2023	MMH/MH/RECH00393	CARD	Advance Amount	10,000.00
2	21/12/2023	MMH/MH/REDH02105	CHEQUE	Collected Amount	622.00
3	21/12/2023	MMH/MH/REDH02106	CARD	Collected Amount	31,111.00