

IN PATIENT SUMMARY BILL

UHID : MH31092

IP No : IP2024001670

Patient name : Mr.NATARAJAN.S

Age : 80 Y 0 M 10 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401662

Bill Date : 01/08/2024

DOA : 25/7/2024 11:06AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 37,125.00
3	DIET CHARGES	₹ 4,500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 5,625.00
5	EQUIPMENT	₹ 7,150.00
6	LABORATORY	₹ 21,984.00
7	NURSING CHARGE	₹ 6,000.00
8	PHYSIOTHERAPY	₹ 4,800.00
9	PROFESSIONAL TEAM FEES	₹ 24,000.00
10	RADIOLOGY	₹ 7,000.00

Gross Amount₹118,534.00

Net Payable₹118,534.00

Advance Amount₹75,000.00

Received Amount₹43,534.00

Received Amount in Words : One Lakh Eighteen Thousand Five Hundred Thirty-Four Only

SUDHA.M
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/25/2024	MMH/MH/RECH202402830	CARD	Advance Amount	20,000.00
2	7/28/2024	MMH/MH/RECH202402872	CARD	Advance Amount	30,000.00
3	7/30/2024	MMH/MH/RECH202402896	CARD	Advance Amount	25,000.00
4	8/1/2024	MMH/MH/REDH202416801	CHEQUE	Collected Amount	1,702.00
5	8/1/2024	MMH/MH/REDH202416802	CARD	Collected Amount	41,832.00