

IN PATIENT SUMMARY BILL

UHID : MH33164

IP No : IP2024000154

Patient name : Mrs.BABY SAROJA.K.S

Age : 80 Y 3 M 21 D/Female

Bill No : MMH/MH/IP202400151

Bill Date : 22/01/2024

DOA : 20/1/2024 11:48PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 7,700.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,500.00
4	EQUIPMENT	₹ 5,000.00
5	GENERAL PROCEDURE	₹ 950.00
6	INJECTION CHARGES	₹ 350.00
7	LABORATORY	₹ 6,272.00
8	NURSING CHARGE	₹ 1,600.00
9	OPERATION THEATRE CHARGES	₹ 7,450.00
10	PROFESSIONAL TEAM FEES	₹ 42,000.00
11	RADIOLOGY	₹ 1,000.00
Gross Amount		₹ 74,172.00
Net Payable		₹ 74,172.00
Advance Amount		₹ 50,000.00
Received Amount		₹ 24,172.00

Received Amount in Words : Seventy-Four Thousand One Hundred
Seventy-Two Only

DINESH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	20/01/2024	MMH/MH/RECH2024002	UPI	Advance Amount	10,000.00
2	21/01/2024	MMH/MH/RECH2024002	CARD	Advance Amount	40,000.00
3	22/01/2024	MMH/MH/REDH2024015	CARD	Collected Amount	24,172.00