

IN PATIENT SUMMARY BILL

UHID : MH36976

IP No : IP2024001770

Patient name : Mr.NARAYANAN S N S

Age : 52 Y 0 M 5 D/Male

Bill No : MMH/MH/IP202401733

Bill Date : 12/08/2024

DOA : 7/8/2024 2:15PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 24,750.00
3	DIET CHARGES	₹ 2,600.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,750.00
5	GENERAL PROCEEDURE	₹ 1,000.00
6	LABORATORY	₹ 14,021.00
7	MISCELLANEOUS	₹ 300.00
8	NURSING CHARGE	₹ 4,000.00
9	OPERATION THEATRE CHARGES	₹ 6,000.00
10	PHYSIOTHERAPY	₹ 1,200.00
11	PROFESSIONAL TEAM FEES	₹ 25,000.00
12	RADIOLOGY	₹ 400.00
Gross Amount		₹ 83,371.00
Net Payable		₹ 83,371.00
Advance Amount		₹ 83,371.00
Received Amount		₹ 0.00

Received Amount in Words : Eighty-Three Thousand Three Hundred Seventy-One Only

SUDHA  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/7/2024	MMH/MH/RECH202403034	UPI	Advance Amount	15,000.00
2	8/12/2024	MMH/MH/RECH202403102	UPI	Advance Amount	68,371.00