

IN PATIENT SUMMARY BILL

UHID : MH36989

IP No : IPH2024000738

Patient name : Mr.RAJAMANICKAM M

Age : 80/Male

Bill No : MMH/HM/IPH202400741

Bill Date : 01/04/2024

DOA : 28/3/2024 2:35PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 600.00
2	BED CHARGES	₹ 22,275.00
3	DIET CHARGES	₹ 3,700.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 4,000.00
5	EQUIPMENT	₹ 5,000.00
6	GENERAL PROCEDURE	₹ 500.00
7	LABORATORY	₹ 44,572.00
8	MEDICAL RECORD CHARGE	₹ 200.00
9	NURSING CHARGE	₹ 800.00
10	OP REGISTRATION	₹ 150.00
11	PHARMACY CHARGE	₹ 24,102.00
12	PROFESSIONAL FEES	₹ 24,500.00
13	RADIOLOGY	₹ 3,120.00
Gross Amount		₹ 133,519.00
Discount Amount		₹ 20,000.00
Net Payable		₹ 113,519.00
Received Amount		₹ 0.00
Amount Payable		₹ 113,519.00

Received Amount in Words : Zero Only

AKASH

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1					