## IN PATIENT SUMMARY BILL

UHID : MH39002 : MMH/MH/IP202401768 Bill No

: 18/08/2024 : IP2024001840 Bill Date IP No

Patient name : Mr.SANTHANAGOPALAN T K : 17/8/2024 8:25AM DOA

: 91 Y 9 M 17 D/Male DOD Age

: CASH Entity Type

: CASH Entity Name

Consultant Name : Dr.VIJAY ALAGAPPAN S

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	4,125.00
3	BLOOD COMPONENTS		₹	2,550.00
4	DUTY MEDICAL OFFICER CHARGE		₹	1,125.00
5	GENERAL PROCEEDURE		₹	500.00
6	LABORATORY		₹	1,254.00
7	NURSING CHARGE		₹	1,200.00
8	OPERATION THEATRE CHARGES		₹	5,350.00
9	PROFESSIONAL TEAM FEES		₹	25,000.00
10	RADIOLOGY		₹	1,210.00
		Gross Amount	₹	42,664.00
		Net Payable	₹	42,664.00
		Advance Amount	₹	30,000.00

₹ **Received Amount** 12,664.00

: Forty-Two Thousand Six Hundred Sixty-Four Only SUDHA **Received Amount in Words** 

**Authorised Signature** 

## **Payment History**

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/17/2024	MMH/MH/RECH202403169	CARD	Advance Amount	30,000.00
2	8/18/2024	MMH/MH/REDH202418013	CHEQUE	Collected Amount	5,048.00
3	8/18/2024	MMH/MH/REDH202418014	CARD	Collected Amount	7,616.00