

### IN PATIENT SUMMARY BILL

UHID : MH41937  
IP No : IP2023002792  
Patient name : Mrs.PARVATHI K  
Age : 75 Y 2 M 25 D/Female

Bill No : MMH/MH/IP00241  
Bill Date : 28/12/2023  
DOA : 23/12/2023 6:47PM  
DOD :  
Entity Type : CASH  
Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 21,000.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 3,500.00
4	LABORATORY	₹ 16,128.00
5	NURSING CHARGE	₹ 3,750.00
6	PROFESSIONAL TEAM FEES	₹ 14,000.00
7	RADIOLOGY	₹ 7,900.00
8	ULTRASOUND	₹ 2,000.00
Gross Amount		₹ 68,628.00
Net Payable		₹ 68,628.00
Advance Amount		₹ 68,628.00
Received Amount		₹ 0.00

Received Amount in Words : Sixty-Eight Thousand Six Hundred  
Twenty-Eight Only

KARTHIK C  
Authorised Signature

### Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	23/12/2023	MMH/MH/RECH00458	UPI	Advance Amount	15,000.00
2	28/12/2023	MMH/MH/RECH00512	CHEQUE	Advance Amount	2,273.00
3	28/12/2023	MMH/MH/RECH00513	UPI	Advance Amount	51,355.00