

IN PATIENT SUMMARY BILL

UHID : MH48371

IP No : IP2024000311

Patient name : Mr.LALA ANANTHARAM

Age : 88 Y 0 M 1 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202400299

Bill Date : 09/02/2024

DOA : 8/2/2024 8:03PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 3,850.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 750.00
4	EQUIPMENT	₹ 600.00
5	LABORATORY	₹ 6,951.00
6	NURSING CHARGE	₹ 800.00
7	PROFESSIONAL FEES	₹ 2,000.00
8	RADIOLOGY	₹ 1,000.00
9	ULTRASOUND	₹ 2,000.00
Gross Amount		₹ 18,301.00
Net Payable		₹ 18,301.00
Advance Amount		₹ 20,000.00
Received Amount		₹ 0.00
Refund Amount		₹ 1,699.00

Received Amount in Words : Twenty Thousand Only

KARTHIK C

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	08/02/2024	MMH/MH/RECH2024004	CARD	Advance Amount	20,000.00