IN PATIENT SUMMARY BILL

UHID : MH52836 Bill No : MMH/MH/IP202401237

IP No : IP2024001226 Bill Date : 10/06/2024

Patient name : Mrs.LALITHA V DOA : 1/6/2024 10:09AM

Age : 81 Y 9 M 2 D/Female DOD

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	26,450.00
3	DIET CHARGES		₹	4,500.00
4	DUTY MEDICAL OFFICER CHARGE		₹	5,250.00
5	EQUIPMENT		₹	9,250.00
6	GENERAL PROCEDURE		₹	2,200.00
7	INTENSIVIST CHARGES		₹	7,500.00
8	LABORATORY		₹	43,521.00
9	NURSING CHARGE		₹	10,600.00
10	PHYSIOTHERAPY		₹	3,400.00
11	PROFESSIONAL TEAM FEES		₹	26,000.00
12	RADIOLOGY		₹	11,025.00
13	TRANSPORT		₹	800.00
		Gross Amount	₹	150,846.00
		Net Payable	₹	150,846.00

 Gross Amount
 ₹
 150,846.00

 Net Payable
 ₹
 150,846.00

 Advance Amount
 ₹
 125,000.00

 Received Amount
 ₹
 25,846.00

Received Amount in Words : One Lakh Fifty Thousand Eight Hundred Forty-Six Only KARTHICK.S

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/1/2024	MMH/MH/RECH202402021	UPI	Advance Amount	30,000.00
2	6/2/2024	MMH/MH/RECH202402034	UPI	Advance Amount	45,000.00
3	6/3/2024	MMH/MH/RECH202402039	UPI	Advance Amount	30,000.00
4	6/5/2024	MMH/MH/RECH202402073	UPI	Advance Amount	20,000.00
5	6/10/2024	MMH/MH/REDH202412446	UPI	Collected Amount	25,846.00