

IN PATIENT SUMMARY BILL

UHID : MH57840

IP No : IP2024000064

Patient name : Mr.VAITHIYANATHAN.T

Age : 61 Y 0 M 27 D/Male

Consultant Name : Dr.CM THIAGARAJAN

Bill No : MMH/MH/IP202400067

Bill Date : 09/01/2024

DOA : 8/1/2024 5:43PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 4,200.00
3	DIET CHARGES	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 700.00
5	GENERAL PROCEDURE	₹ 500.00
6	LABORATORY	₹ 1,596.00
7	NURSING CHARGE	₹ 750.00
8	PROFESSIONAL FEES	₹ 1,000.00
9	ULTRASOUND	₹ 2,000.00
Gross Amount		₹ 11,596.00
Net Payable		₹ 11,596.00
Received Amount		₹ 11,596.00

Received Amount in Words : Eleven Thousand Five Hundred Ninety-Six Only

DINESH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	09/01/2024	MMH/MH/REDH2024006	UPI	Collected Amount	11,596.00