

IN PATIENT SUMMARY BILL

UHID : MH57920
IP No : IP2023002579
Patient name : Ms.NANTHINI
Age : 30/Female

Bill No : MMH/MH/IP00074
Bill Date : 03/12/2023
DOA : 27/11/2023 10:52AM
DOD :
Entity Type : CASH
Entity Name : CASH

Consultant Name : Dr.C.M.THIAGARAJAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 24,750.00
3	BLOOD COMPONENTS	₹ 500.00
4	DIET CHARGES	₹ 346.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 40,000.00
6	EQUIPMENT	₹ 9,000.00
7	GENERAL PROCEDURE	₹ 950.00
8	INJECTION CHARGES	₹ 880.00
9	LABORATORY	₹ 1,308.00
10	NURSING CHARGE	₹ 60,000.00
11	OPERATION THEATRE CHARGES	₹ 103,076.00
12	OTHER ADDITION	₹ 1.00
13	PHARMACY CHARGE	₹ 49,994.00
14	RADIOLOGY	₹ 3,720.00

Gross Amount ₹ **294,875.00**
Net Payable ₹ **294,875.00**
Received Amount ₹ **325,479.00**

Received Amount in Words : Three Lakh Twenty-Five Thousand Four
Hundred Seventy-Nine Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	2023-12-08 19:58:06.816	MMH/MH/REDH01142	CHEQUE	Collected Amount	325,479.00