

IN PATIENT SUMMARY BILL

UHID : MH58574
IP No : IP2023002812
Patient name : Mrs.VENKATA LAKSHMI
Age : 54 Y 1 M 28 D/Female

Bill No : MMH/MH/IP00275
Bill Date : 31/12/2023
DOA : 27/12/2023 11:09AM
DOD :
Entity Type : CASH
Entity Name : CASH

Consultant Name : Dr.ARUN KUMAR.I

| S.No | Description | Amount |
|------|-----------------------------|-------------|
| 1 | ADMINISTRATION CHARGES | ₹ 350.00 |
| 2 | BED CHARGES | ₹ 11,000.00 |
| 3 | DUTY MEDICAL OFFICER CHARGE | ₹ 2,800.00 |
| 4 | GENERAL PROCEDURE | ₹ 950.00 |
| 5 | LABORATORY | ₹ 1,177.00 |
| 6 | NURSING CHARGE | ₹ 3,000.00 |
| 7 | OPERATION THEATRE CHARGES | ₹ 20,550.00 |
| 8 | PHYSIOTHERAPY | ₹ 3,400.00 |
| 9 | PROFESSIONAL TEAM FEES | ₹ 62,000.00 |
| 10 | RADIOLOGY | ₹ 1,650.00 |

Gross Amount ₹ **106,877.00**

Net Payable ₹ **106,877.00**

Advance Amount ₹ **30,000.00**

Received Amount ₹ **76,877.00**

Received Amount in Words : One Lakh Six Thousand Eight Hundred
Seventy-Seven Only

DINESH
Authorised Signature

Payment History

| S.No | Receipt Date | Receipt Code | Payment Mode | Trans. Type | Received Amount |
|------|--------------|------------------|--------------|------------------|-----------------|
| 1 | 27/12/2023 | MMH/MH/RECH00494 | CARD | Advance Amount | 30,000.00 |
| 2 | 31/12/2023 | MMH/MH/REDH02847 | CARD | Collected Amount | 76,877.00 |