

IN PATIENT SUMMARY BILL

UHID : MH59005

IP No : IP2024000797

Patient name : Ms.JASMINA PARVEEN

Age : 16 Y 9 M 4 D/Female

Consultant Name : Dr.SOORYA AJAY RAO

Bill No : MMH/MH/IP202400789

Bill Date : 11/04/2024

DOA : 4/4/2024 8:25PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 9,900.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,500.00
4	INJECTION CHARGES	₹ 200.00
5	LABORATORY	₹ 144.00
6	NURSING CHARGE	₹ 1,600.00
7	OPERATION THEATRE CHARGES	₹ 12,850.00
8	PHARMACY CHARGE	₹ 8,160.00
9	PROFESSIONAL TEAM FEES	₹ 31,296.00
10	RADIOLOGY	₹ 2,000.00
Gross Amount		₹ 68,000.00
Net Payable		₹ 68,000.00
Advance Amount		₹ 65,000.00
Received Amount		₹ 3,000.00

Received Amount in Words : Sixty-Eight Thousand Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	06/04/2024	MMH/MH/RECH20240124	UPI	Advance Amount	65,000.00
2	11/04/2024	MMH/MH/REDH2024077	CASH	Collected Amount	3,000.00