

IN PATIENT SUMMARY BILL

UHID : MHI202370216  
IP No : IPH2024000790  
Patient name : Mr.VISWANATHAN  
Age : 73 Y 7 M 28 D/Male

Bill No : MMH/HM/IPH202400769  
Bill Date : 03/04/2024  
DOA : 3/4/2024 9:40AM  
DOD :  
Entity Type : CASH  
Entity Name : CASH

Consultant Name : Dr.K.JAISHANKAR

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 9,452.00
2	PHARMACY CHARGE	₹ 6,548.00
Gross Amount		₹ 16,000.00
Net Payable		₹ 16,000.00
Advance Amount		₹ 16,000.00
Received Amount		₹ 0.00

Received Amount in Words :

AKASH  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	03/04/2024	MMH/HM/RECAP2024005	CARD	Advance Amount	16,000.00