

IN PATIENT SUMMARY BILL

UHID : MHI202373795

IP No : IPH2024000157

Patient name : Mr.CHANDRA SEKAR G

Age : 55/Male

Bill No : MMH/HM/IPH202400159

Bill Date : 24/01/2024

DOA : 21/1/2024 3:49PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.ANBARASU MOHANRAJ

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 600.00
2	BED CHARGES	₹ 16,750.00
3	BLOOD COMPONENTS	₹ 1,000.00
4	DIET CHARGES	₹ 1,900.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 1,600.00
6	EQUIPMENT	₹ 2,500.00
7	GENERAL PROCEDURE	₹ 1,000.00
8	INTENSIVIST CHARGES	₹ 3,000.00
9	LABORATORY	₹ 10,547.00
10	MEDICAL RECORD CHARGE	₹ 200.00
11	NURSING CHARGE	₹ 3,600.00
12	OP REGISTRATION	₹ 150.00
13	PHARMACY CHARGE	₹ 21,613.00
14	PROFESSIONAL FEES	₹ 15,200.00
15	RADIOLOGY	₹ 7,050.00
Gross Amount		₹ 86,710.00
Net Payable		₹ 86,710.00
Advance Amount		₹ 30,000.00
Received Amount		₹ 56,710.00

Received Amount in Words : Eighty-Six Thousand Seven Hundred Ten Only

ASHWIN

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	21/01/2024	MMH/HM/RECAP2024001	UPI	Advance Amount	30,000.00
2	24/01/2024	MMH/HM/RECB202401	CARD	Collected Amount	54,000.00
3	24/01/2024	MMH/HM/RECB202401	CASH	Collected Amount	2,710.00