

IN PATIENT SUMMARY BILL

UHID : MHI202377015

IP No : IP2024001246

Patient name : Mrs.VEDASANDHIYA

Age : 26 Y 0 M 3 D/Female

Consultant Name : Dr.CM THIAGARAJAN

Bill No : MMH/MH/IP202401274

Bill Date : 15/06/2024

DOA : 3/6/2024 12:59PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 29,700.00
3	BLOOD COMPONENTS	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 36,000.00
5	EQUIPMENT	₹ 9,000.00
6	GENERAL PROCEDURE	₹ 2,000.00
7	INJECTION CHARGES	₹ 880.00
8	LABORATORY	₹ 996.00
9	NURSING CHARGE	₹ 45,000.00
10	OPERATION THEATRE CHARGES	₹ 75,350.00
11	PHARMACY CHARGE	₹ 49,577.00
12	RADIOLOGY	₹ 720.00
Gross Amount		₹ 250,073.00
Net Payable		₹ 250,073.00
Received Amount		₹ 1,500,000.00
Refund Amount		₹ 1,249,927.00

Received Amount in Words : Fifteen Lakh Zero Only

SRINIVASAN
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/15/2024	MMH/MH/REDH202412907	NEFT	Collected Amount	1,500,000.00