IN PATIENT SUMMARY BILL

UHID : MMH202370649 Bill No : MMH/MH/IP202402017

IP No : IP2024001939 Bill Date : 20/09/2024

Patient name : Mrs.PUSHPA DOA : 31/8/2024 11:50AM

Age : 45/Female DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.CM THIAGARAJAN

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	34,650.00
3	BLOOD COMPONENTS		₹	1,000.00
4	DIET CHARGES		₹	3,650.00
5	DUTY MEDICAL OFFICER CHARGE		₹	28,000.00
6	EQUIPMENT		₹	10,000.00
7	INJECTION CHARGES		₹	1,340.00
8	LABORATORY		₹	1,704.00
9	NURSING CHARGE		₹	21,000.00
10	OPERATION THEATRE CHARGES		₹	44,150.00
11	PHARMACY CHARGE		₹	54,142.00
12	PROCEDURE CHARGES		₹	3,500.00
13	RADIOLOGY		₹	720.00
		Gross Amount	₹	204,206.00

 Gross Amount
 ₹
 204,206.00

 Net Payable
 ₹
 204,206.00

 Advance Amount
 ₹
 900,000.00

 Received Amount
 ₹
 600,000.00

 Refund Amount
 ₹
 1,295,794.00

Received Amount in Words : Fifteen Lakh Zero Only SUDHA

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/1/2024	MMH/MH/RECH202403867	CHEQUE	Advance Amount	900,000.00
2	10/1/2024	MMH/MH/REDH202421608	CHEQUE	Collected Amount	600,000.00