

IN PATIENT SUMMARY BILL

UHID : MMH202371222

IP No : IP2023002535

Patient name : Mrs.DHANALAKSHMI R

Age : 45 Y 6 M 22 D/Female

Bill No : MMH/MH/IP00041

Bill Date : 30/11/2023

DOA : 21/11/2023 6:30PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.RAMESH BABU

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 38,550.00
3	BLOOD COMPONENTS	₹ 3,600.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 6,300.00
5	EQUIPMENT	₹ 3,000.00
6	GENERAL PROCEDURE	₹ 1,450.00
7	INJECTION CHARGES	₹ 800.00
8	LABORATORY	₹ 2,040.00
9	NURSING CHARGE	₹ 6,750.00
10	OPERATION THEATRE CHARGES	₹ 24,350.00
11	PHYSIOTHERAPY	₹ 1,800.00
12	PROFESSIONAL TEAM FEES	₹ 117,000.00
13	ULTRASOUND	₹ 2,400.00
Gross Amount		₹ 208,390.00
Net Payable		₹ 208,390.00
Advance Amount		₹ 208,390.00
Received Amount		₹ 0.00

Received Amount in Words : Two Lakh Eight Thousand Three Hundred Ninety Only

DINESH  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	2023-11-21 19:33:14.980	MMH/MH/RECH00006	CARD	Advance Amount	50,000.00
2	2023-11-30 17:01:20.030	MMH/MH/RECH00134	AFFORDPLAN	Advance Amount	41,390.00
3	2023-11-30 17:01:20.043	MMH/MH/RECH00135	UPI	Advance Amount	117,000.00