IN PATIENT SUMMARY BILL

UHID : MHI202380939 Bill No : MMH/HM/IPH00450

IP No : IPH202302369 Bill Date : 06/12/2023

Patient name Mr.BASKARAN.S DOA : 27/11/2023 11:08AM

Age : 49 Y 2 M 28 D/Male DOD

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.ANBARASU MOHANRAJ

S.No	Description		Amount
1	ADMINISTRATION CHARGES	₹	200.00
2	BED CHARGES	₹	24,000.00
3	BLOOD COMPONENTS	₹	500.00
4	DIET CHARGES	₹	9,100.00
5	GENERAL PROCEDURE	₹	1,000.00
6	LABORATORY	₹	14,498.00
7	MEDICAL RECORD CHARGE	₹	200.00
8	NURSING CHARGE	₹	8,000.00
9	OP REGISTRATION	₹	150.00
10	OPERATION THEATRE CHARGES	₹	24,000.00
11	PHARMACY CHARGE	₹	85,119.00
12	PROFESSIONAL TEAM FEES	₹	80,000.00
13	RADIOLOGY	₹	5,150.00
14	SURGICAL PACKAGE-HEART	₹	3,083.00

 Gross Amount
 ₹
 255,000.00

 Net Payable
 ₹
 255,000.00

 Advance Amount
 ₹
 255,000.00

 Received Amount
 ₹
 0.00

Received Amount in Words : Two Lakh Fifty-Five Thousand Only IYAPPAN R

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	2023-11-27 11:13:00.310	MMH/HM/RECAP00383	CASH	Advance Amount	200,000.00
2	2023-12-02 12:10:12.920	MMH/HM/RECAP00444	CARD	Advance Amount	55,000.00