

IN PATIENT SUMMARY BILL

UHID : MMH202371494

IP No : IP2024001905

Patient name : Mr.VENKATESAN P

Age : 42 Y 11 M 21 D/Male

Consultant Name : Dr.SHIVA KUMAR D

Bill No : MMH/MH/IP202401884

Bill Date : 01/09/2024

DOA : 26/8/2024 2:54PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 16,500.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 4,500.00
4	EQUIPMENT	₹ 5,000.00
5	GENERAL PROCEEDURE	₹ 1,500.00
6	LABORATORY	₹ 28,919.00
7	NURSING CHARGE	₹ 4,800.00
8	OPERATION THEATRE CHARGES	₹ 8,850.00
9	PROFESSIONAL TEAM FEES	₹ 41,000.00
10	RADIOLOGY	₹ 9,400.00

Gross Amount₹120,819.00

Net Payable₹120,819.00

Advance Amount₹73,000.00

Received Amount₹47,819.00

Received Amount in Words : One Lakh Twenty Thousand Eight Hundred Nineteen Only

KARTHICK
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/26/2024	MMH/MH/RECH202403292	UPI	Advance Amount	3,000.00
2	9/1/2024	MMH/MH/REDH202419141	UPI	Collected Amount	17,819.00
3	8/27/2024	MMH/MH/RECH202403307	CARD	Advance Amount	30,000.00
4	8/30/2024	MMH/MH/RECH202403355	CARD	Advance Amount	40,000.00
5	9/1/2024	MMH/MH/REDH202419140	CARD	Collected Amount	15,000.00
6	9/1/2024	MMH/MH/REDH202419139	CASH	Collected Amount	15,000.00