

IN PATIENT SUMMARY BILL

UHID : MMH202371732

IP No : IPH202302462

Patient name : Mr.RAJAGOPAL RAGHUNATHAN

Age : 56 Y 3 M 17 D/Male

Bill No : MMH/HM/IPH00491

Bill Date : 12/12/2023

DOA : 8/12/2023 3:31PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.DURAI RAVI

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 200.00
2	BED CHARGES	₹ 4,950.00
3	DIET CHARGES	₹ 800.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 800.00
5	EQUIPMENT	₹ 1,500.00
6	GENERAL PROCEDURE	₹ 500.00
7	INJECTION CHARGES	₹ 200.00
8	LABORATORY	₹ 1,387.00
9	MEDICAL RECORD CHARGE	₹ 200.00
10	NURSING CHARGE	₹ 800.00
11	OP REGISTRATION	₹ 150.00
12	OPERATION THEATRE CHARGES	₹ 12,350.00
13	PHARMACY CHARGE	₹ 7,737.00
14	PROFESSIONAL TEAM FEES	₹ 43,426.00
Gross Amount		₹ 75,000.00
Net Payable		₹ 75,000.00
Advance Amount		₹ 75,000.00
Received Amount		₹ 0.00

Received Amount in Words : Seventy-Five Thousand Only

IYAPPAN R

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	2023-12-08 15:35:20.136	MMH/HM/RECAP00496	CARD	Advance Amount	75,000.00