

IN PATIENT SUMMARY BILL

UHID	: MMH202372014	Bill No	: MMH/MH/IP00164
IP No	: IP2023002729	Bill Date	: 18/12/2023
Patient name	: Mrs.VASANTHA N	DOA	: 15/12/2023 4:19AM
Age	: 71 Y 9 M 20 D/Female	DOD	:
		Entity Type	: CASH
		Entity Name	: CASH
Consultant Name	: Dr.T.PALANIAPPAN		

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 26,250.00
3	EQUIPMENT	₹ 34,750.00
4	GENERAL PROCEDURE	₹ 500.00
5	INTENSIVIST CHARGES	₹ 10,500.00
6	INVESTIGATIONS	₹ 400.00
7	LABORATORY	₹ 13,978.00
8	NURSING CHARGE	₹ 7,000.00
9	PHYSIOTHERAPY	₹ 1,400.00
10	PROFESSIONAL TEAM FEES	₹ 7,000.00
11	RADIOLOGY	₹ 15,000.00
12	TRANSPORT	₹ 800.00
Gross Amount		₹ 117,928.00
Net Payable		₹ 117,928.00
Advance Amount		₹ 100,000.00
Received Amount		₹ 17,928.00

Received Amount in Words : One Lakh Seventeen Thousand Nine Hundred
Twenty-Eight Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	2023-12-18 13:07:11.876	MMH/MH/REDH01825	CARD	Collected Amount	17,928.00