

IN PATIENT SUMMARY BILL

UHID : MMH202372061

IP No : IP2024001561

Patient name : Mr.SUKUMARAN A

Age : 69 Y 7 M 20 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401605

Bill Date : 26/07/2024

DOA : 11/7/2024 5:25PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 3,750.00
3	DIALYSIS / DIALYZER	₹ 6,100.00
4	EQUIPMENT	₹ 8,250.00
5	INTENSIVIST CHARGES	₹ 1,500.00
6	LABORATORY	₹ 25,080.00
7	NURSING CHARGE	₹ 1,000.00
8	PROCEDURE CHARGES	₹ 12,000.00
9	PROFESSIONAL TEAM FEES	₹ 6,000.00
10	RADIOLOGY	₹ 10,425.00
Gross Amount		₹ 74,455.00
Net Payable		₹ 74,455.00
Received Amount		₹ 0.00
Amount Payable		₹ 74,455.00

Received Amount in Words : Zero Only

SUDHA  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1					