

IN PATIENT SUMMARY BILL

UHID : MMH202372222

IP No : IP2024000455

Patient name : Mr.AJAY SHANMUGA PRIYAN R

Age : 31 Y 6 M 20 D/Male

Bill No : MMH/MH/IP202400462

Bill Date : 29/02/2024

DOA : 28/2/2024 6:23PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.VISHNUBABU.G

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 4,950.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 750.00
4	LABORATORY	₹ 144.00
5	NURSING CHARGE	₹ 800.00
6	OPERATION THEATRE CHARGES	₹ 8,000.00
7	PROFESSIONAL TEAM FEES	₹ 14,000.00
Gross Amount		₹ 28,994.00
Net Payable		₹ 28,994.00
Advance Amount		₹ 15,000.00
Received Amount		₹ 13,994.00

Received Amount in Words : Twenty-Eight Thousand Nine Hundred Ninety-Four Only

DINESH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	28/02/2024	MMH/MH/RECH2024007	CASH	Advance Amount	5,000.00
2	28/02/2024	MMH/MH/RECH2024007	CASH	Advance Amount	10,000.00
3	29/02/2024	MMH/MH/REDH2024044	CASH	Collected Amount	13,994.00