

IN PATIENT SUMMARY BILL

UHID : MMH202372493

IP No : IP2024002026

Patient name : Mrs.SAMPATH KUMARI.D

Age : 67 Y 9 M 22 D/Female

Bill No : MMH/MH/IP202401956

Bill Date : 12/09/2024

DOA : 12/9/2024 7:02AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.VENKATACHALAM VEERAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 4,950.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 750.00
4	LABORATORY	₹ 3,420.00
5	NURSING CHARGE	₹ 800.00
6	PROFESSIONAL TEAM FEES	₹ 15,000.00
Gross Amount		₹ 25,270.00
Net Payable		₹ 25,270.00
Advance Amount		₹ 10,000.00
Received Amount		₹ 15,270.00

Received Amount in Words : Twenty-Five Thousand Two Hundred Seventy Only

SUDHA
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/12/2024	MMH/MH/RECH202403536	UPI	Advance Amount	10,000.00
2	9/12/2024	MMH/MH/REDH202420075	CARD	Collected Amount	15,270.00