

**IN PATIENT SUMMARY BILL**

UHID : MMH202372577  
IP No : IP2023002820  
Patient name : Mrs.RADHA DORAISWAMY T E  
Age : 78 Y 3 M 24 D/Female

Bill No : MMH/MH/IP00262  
Bill Date : 30/12/2023  
DOA : 27/12/2023 7:06PM  
DOD :  
Entity Type : CASH  
Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 12,600.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 2,100.00
4	GENERAL PROCEDURE	₹ 900.00
5	INJECTION CHARGES	₹ 200.00
6	LABORATORY	₹ 17,869.00
7	NURSING CHARGE	₹ 2,250.00
8	OPERATION THEATRE CHARGES	₹ 5,000.00
9	PROFESSIONAL TEAM FEES	₹ 36,000.00
10	RADIOLOGY	₹ 2,560.00
11	ULTRASOUND	₹ 2,000.00
<b>Gross Amount</b>		₹ <b>81,829.00</b>
<b>Net Payable</b>		₹ <b>81,829.00</b>
<b>Advance Amount</b>		₹ <b>20,000.00</b>
<b>Received Amount</b>		₹ <b>61,829.00</b>

**Received Amount in Words** : Eighty-One Thousand Eight Hundred  
Twenty-Nine Only

KARTHIK C  
**Authorised Signature**

**Payment History**

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	27/12/2023	MMH/MH/RECH00503	CARD	Advance Amount	20,000.00
2	30/12/2023	MMH/MH/REDH02785	CARD	Collected Amount	61,829.00