

IN PATIENT SUMMARY BILL

UHID : MMH202372614

IP No : IP2023002828

Patient name : Mrs.SAROJA G

Age : 77 Y 0 M 7 D/Female

Bill No : MMH/MH/IP202400029

Bill Date : 04/01/2024

DOA : 28/12/2023 5:03PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 39,700.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,400.00
4	EQUIPMENT	₹ 12,000.00
5	GENERAL PROCEDURE	₹ 950.00
6	INTENSIVIST CHARGES	₹ 15,000.00
7	LABORATORY	₹ 29,489.00
8	NURSING CHARGE	₹ 11,500.00
9	OPERATION THEATRE CHARGES	₹ 2,500.00
10	PHYSIOTHERAPY	₹ 1,400.00
11	PROFESSIONAL TEAM FEES	₹ 40,000.00
12	RADIOLOGY	₹ 12,525.00
13	TRANSPORT	₹ 2,000.00
14	ULTRASOUND	₹ 2,000.00
Gross Amount		₹ 170,814.00
Net Payable		₹ 170,814.00
Advance Amount		₹ 90,000.00
Received Amount		₹ 80,814.00

Received Amount in Words : One Lakh Seventy Thousand Eight Hundred Fourteen Only

DINESH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	28/12/2023	MMH/MH/RECH00515	UPI	Advance Amount	25,000.00
2	28/12/2023	MMH/MH/RECH00516	CASH	Advance Amount	5,000.00
3	30/12/2023	MMH/MH/RECH00566	CARD	Advance Amount	20,000.00
4	02/01/2024	MMH/MH/RECH2024000	CARD	Advance Amount	20,000.00
5	03/01/2024	MMH/MH/RECH2024000	CARD	Advance Amount	20,000.00
6	04/01/2024	MMH/MH/REDH2024003	CARD	Collected Amount	80,814.00