

IN PATIENT SUMMARY BILL

UHID : MMH202372643
IP No : IP2023002844
Patient name : Mr.WASEEQH AHMED A
Age : 24 Y 2 M 11 D/Male

Bill No : MMH/MH/IP00271
Bill Date : 31/12/2023
DOA : 30/12/2023 9:12AM
DOD :
Entity Type : CASH
Entity Name : CASH

Consultant Name : Dr.ARUNKUMAR.I

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 1,100.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 700.00
4	INJECTION CHARGES	₹ 200.00
5	LABORATORY	₹ 4,904.00
6	NURSING CHARGE	₹ 750.00
7	OPERATION THEATRE CHARGES	₹ 11,850.00
8	PROFESSIONAL TEAM FEES	₹ 25,000.00
9	RADIOLOGY	₹ 820.00
Gross Amount		₹ 45,674.00
Net Payable		₹ 45,674.00
Advance Amount		₹ 20,000.00
Received Amount		₹ 25,674.00

Received Amount in Words : Forty-Five Thousand Six Hundred
Seventy-Four Only

DINESH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	30/12/2023	MMH/MH/RECH00552	UPI	Advance Amount	20,000.00
2	31/12/2023	MMH/MH/REDH02836	CARD	Collected Amount	25,674.00