

IN PATIENT SUMMARY BILL

UHID : MHI202381576

IP No : IPH2023002639

Patient name : Mr.PRASAD SUGUMARAN

Age : 43 Y 0 M 6 D/Male

Bill No : MMH/HM/IPH202400033

Bill Date : 05/01/2024

DOA : 30/12/2023 4:30PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 600.00
2	BED CHARGES	₹ 29,700.00
3	DIET CHARGES	₹ 5,000.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 7,500.00
5	EQUIPMENT	₹ 2,100.00
6	GENERAL PROCEDURE	₹ 4,000.00
7	LABORATORY	₹ 41,278.00
8	MEDICAL RECORD CHARGE	₹ 200.00
9	NURSING CHARGE	₹ 6,000.00
10	OP REGISTRATION	₹ 150.00
11	PROFESSIONAL TEAM FEES	₹ 30,500.00
12	RADIOLOGY	₹ 13,000.00
Gross Amount		₹ 140,028.00
Net Payable		₹ 140,028.00
Advance Amount		₹ 116,715.00
Received Amount		₹ 23,313.00

Received Amount in Words : One Lakh Forty Thousand Twenty-Eight Only

IYAPPAN R

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	30/12/2023	MMH/HM/RECAP00742	UPI	Advance Amount	30,000.00
2	04/01/2024	MMH/HM/RECAP2024000	AFFORDPLAN	Advance Amount	86,715.00
3	05/01/2024	MMH/HM/RECBD202400	AFFORDPLAN	Collected Amount	23,313.00