

IN PATIENT SUMMARY BILL

UHID : MHI202400005

IP No : IPH2024000053

Patient name : Mr.VENKATRAMAN SUBRAMANIAM

Age : 68 Y 8 M 29 D/Male

Bill No : MMH/HM/IPH202400070

Bill Date : 09/01/2024

DOA : 7/1/2024 7:38PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.K.JAISHANKAR

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 600.00
2	BED CHARGES	₹ 9,900.00
3	CARDIOLOGY PACKAGE-HEART	₹ 59,864.00
4	DIET CHARGES	₹ 1,600.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 1,600.00
6	EQUIPMENT	₹ 1,750.00
7	GENERAL PROCEDURE	₹ 500.00
8	IMPLANT	₹ 120,000.00
9	LABORATORY	₹ 948.00
10	MEDICAL RECORD CHARGE	₹ 200.00
11	NURSING CHARGE	₹ 1,600.00
12	OP REGISTRATION	₹ 150.00
13	OPERATION THEATRE CHARGES	₹ 2,000.00
14	PHARMACY CHARGE	₹ 18,488.00
15	PROFESSIONAL TEAM FEES	₹ 100,000.00
16	RADIOLOGY	₹ 800.00
Gross Amount		₹ 320,000.00
Net Payable		₹ 320,000.00
Advance Amount		₹ 320,000.00
Received Amount		₹ 0.00

Received Amount in Words : Three Lakh Twenty Thousand Only

IYAPPAN R

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	07/01/2024	MMH/HM/RECAP2024000	CARD	Advance Amount	200,000.00
2	09/01/2024	MMH/HM/RECAP2024000	CARD	Advance Amount	120,000.00