

IN PATIENT SUMMARY BILL

UHID : MHC202400260

IP No : IPC2024000022

Patient name : Mrs.NANTHINI

Age : 27 Y 0 M 3 D/Female

Bill No : MMH/CM/IP202400013

Bill Date : 05/01/2024

DOA : 3/1/2024 9:47PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.CHRISTINA RAJKUMAR(MD,DGO)

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 250.00
2	BED CHARGES	₹ 3,000.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,000.00
4	INFECTION CONTROL	₹ 100.00
5	LABORATORY	₹ 2,570.00
6	MEDICAL RECORD CHARGE	₹ 200.00
7	NURSING CHARGE	₹ 500.00
8	RADIOLOGY	₹ 1,300.00
Gross Amount		₹ 8,920.00
Net Payable		₹ 8,920.00
Received Amount		₹ 8,920.00

Received Amount in Words : Eight Thousand Nine Hundred Twenty Only

MARAN.R

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	05/01/2024	MMH/CM/RECB202400'	UPI	Collected Amount	6,000.00
2	05/01/2024	MMH/CM/RECB202400'	CASH	Collected Amount	920.00
3	05/01/2024	MMH/CM/RECB202400'	CARD	Collected Amount	2,000.00