

IN PATIENT SUMMARY BILL

UHID : MMH202372659

IP No : IP2023002842

Patient name : Mr.PALANI.T

Age : 38 Y 6 M 26 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202400031

Bill Date : 05/01/2024

DOA : 30/12/2023 12:57AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 46,100.00
3	DIET CHARGES	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 700.00
5	EQUIPMENT	₹ 17,000.00
6	GENERAL PROCEDURE	₹ 1,700.00
7	INTENSIVIST CHARGES	₹ 18,000.00
8	LABORATORY	₹ 16,538.00
9	NURSING CHARGE	₹ 12,750.00
10	PHYSIOTHERAPY	₹ 4,200.00
11	PROFESSIONAL TEAM FEES	₹ 14,000.00
12	RADIOLOGY	₹ 15,900.00
Gross Amount		₹ 147,738.00
Net Payable		₹ 147,738.00
Advance Amount		₹ 140,000.00
Received Amount		₹ 7,738.00

Received Amount in Words : One Lakh Forty-Seven Thousand Seven Hundred Thirty-Eight Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	01/01/2024	MMH/MH/RECH20240000	CASH	Advance Amount	50,000.00
2	02/01/2024	MMH/MH/RECH20240000	CASH	Advance Amount	50,000.00
3	04/01/2024	MMH/MH/RECH20240000	UPI	Advance Amount	40,000.00
4	05/01/2024	MMH/MH/REDH20240003	CARD	Collected Amount	7,738.00