

IN PATIENT SUMMARY BILL

UHID : MHC202400533

IP No : IPC2024000026

Patient name : Mr.KRISHNAN

Age : 85 Y 0 M 1 D/Male

Consultant Name : Dr.ARTHI (ANESTH)

Bill No : MMH/CM/IP202400014

Bill Date : 05/01/2024

DOA : 4/1/2024 9:00AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 250.00
2	BED CHARGES	₹ 4,000.00
3	EQUIPMENT	₹ 16,000.00
4	INFECTION CONTROL	₹ 100.00
5	INTENSIVIST CHARGES	₹ 1,500.00
6	LABORATORY	₹ 4,584.00
7	MEDICAL RECORD CHARGE	₹ 200.00
8	NURSING CHARGE	₹ 375.00
9	PROFESSIONAL TEAM FEES	₹ 3,000.00
10	RADIOLOGY	₹ 660.00
11	TRANSPORT	₹ 600.00
12	ULTRASOUND	₹ 1,700.00
Gross Amount		₹ 32,969.00
Net Payable		₹ 32,969.00
Advance Amount		₹ 32,969.00
Received Amount		₹ 0.00

Received Amount in Words : Thirty-Two Thousand Nine Hundred Sixty-Nine Only

MARAN.R  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	04/01/2024	MMH/CM/RECAP2024000	CASH	Advance Amount	5,000.00
2	05/01/2024	MMH/CM/RECAP2024000	CASH	Advance Amount	15,600.00
3	05/01/2024	MMH/CM/RECAP2024000	UPI	Advance Amount	12,369.00