IN PATIENT SUMMARY BILL

UHID : MHC202400924 Bill No : MMH/CM/IP202400044

IP No : IPC2024000049 Bill Date : 07/01/2024

Patient name Mr.VEERAMANI.M DOA : 6/1/2024 12:17PM

Age : 31 Y 0 M 1 D/Male DOD

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.ARTHI (ANESTH)

S.No	Description		Amount
1	ADMINISTRATION CHARGES	₹	250.00
2	BED CHARGES	₹	2,775.00
3	DUTY MEDICAL OFFICER CHARGE	₹	750.00
4	INFECTION CONTROL	₹	100.00
5	LABORATORY	₹	504.00
6	MEDICAL RECORD CHARGE	₹	200.00
7	NURSING CHARGE	₹	375.00
8	PROFESSIONAL TEAM FEES	₹	600.00
9	RADIOLOGY	₹	660.00
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Gross Amount ₹ 6,214.00 Net Payable ₹ 6,214.00 Received Amount ₹ 6,214.00

Received Amount in Words : Six Thousand Two Hundred Fourteen Only BANUPRIYA.A

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	07/01/2024	MMH/CM/RECBD202401	CASH	Collected Amount	6,214.00