

IN PATIENT SUMMARY BILL

UHID : MHI202481669 Bill No : MMH/HM/IPH202400083
 IP No : IPH2024000052 Bill Date : 11/01/2024
 Patient name : Mr.KUPPUSAMY P DOA : 7/1/2024 6:20PM
 Age : 75 Y 0 M 10 D/Male DOD :
 Entity Type : CASH
 Consultant Name : Dr.G. GNANAVELU Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 600.00
2	BED CHARGES	₹ 16,750.00
3	CARDIOLOGY PACKAGE-HEART	₹ 16,000.00
4	DIET CHARGES	₹ 3,400.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 1,600.00
6	EQUIPMENT	₹ 16,500.00
7	GENERAL PROCEDURE	₹ 500.00
8	INTENSIVIST CHARGES	₹ 2,500.00
9	LABORATORY	₹ 14,796.00
10	MEDICAL RECORD CHARGE	₹ 200.00
11	NURSING CHARGE	₹ 3,600.00
12	OP REGISTRATION	₹ 150.00
13	PHARMACY CHARGE	₹ 35,209.00
14	PROFESSIONAL FEES	₹ 8,000.00
15	RADIOLOGY	₹ 1,950.00
		₹ 121,755.00
		₹ 121,755.00
		₹ 121,755.00
		₹ 0.00

Received Amount in Words : One Lakh Twenty-One Thousand Seven
 Hundred Fifty-Five Only **Authorised Signature**

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	07/01/2024	MMH/HM/RECAP2024000	CASH	Advance Amount	30,000.00
2	08/01/2024	MMH/HM/RECAP2024000	CASH	Advance Amount	16,000.00
3	10/01/2024	MMH/HM/RECAP2024001	AFFORDPLAN	Advance Amount	75,755.00