

IN PATIENT SUMMARY BILL

UHID : MMH202472841

IP No : IP2024000063

Patient name : Mrs.DHEIVANAI SOMASUNDARAM

Age : 46 Y 1 M 7 D/Female

Bill No : MMH/MH/IP202400087

Bill Date : 11/01/2024

DOA : 8/1/2024 5:46PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.VENKATACHALAM VEERAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 14,850.00
3	DIET CHARGES	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 2,100.00
5	EQUIPMENT	₹ 20,000.00
6	GENERAL PROCEDURE	₹ 500.00
7	INJECTION CHARGES	₹ 201.00
8	LABORATORY	₹ 5,160.00
9	NURSING CHARGE	₹ 2,250.00
10	OPERATION THEATRE CHARGES	₹ 24,950.00
11	PROFESSIONAL TEAM FEES	₹ 51,500.00
Gross Amount		₹ 122,361.00
Net Payable		₹ 122,361.00
Advance Amount		₹ 30,000.00
Received Amount		₹ 92,361.00

Received Amount in Words : One Lakh Twenty-Two Thousand Three Hundred Sixty-One Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	08/01/2024	MMH/MH/RECH20240010	CASH	Advance Amount	30,000.00
2	11/01/2024	MMH/MH/REDH2024008	CHEQUE	Collected Amount	1,161.00
3	11/01/2024	MMH/MH/REDH2024008	CASH	Collected Amount	91,200.00