

IN PATIENT SUMMARY BILL

UHID : MMH202472853

IP No : IP2024000156

Patient name : Mr.VIJAYA MOHAN P

Age : 52 Y 8 M 15 D/Male

Bill No : MMH/MH/IP202400176

Bill Date : 25/01/2024

DOA : 21/1/2024 3:35PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.VIJAYAN.J

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 19,800.00
3	DIET CHARGES	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,000.00
5	EQUIPMENT	₹ 1,500.00
6	GENERAL PROCEDURE	₹ 500.00
7	INJECTION CHARGES	₹ 200.00
8	LABORATORY	₹ 8,544.00
9	NURSING CHARGE	₹ 3,200.00
10	OPERATION THEATRE CHARGES	₹ 13,350.00
11	PROFESSIONAL TEAM FEES	₹ 52,000.00
12	RADIOLOGY	₹ 1,000.00
13	ULTRASOUND	₹ 2,000.00
Gross Amount		₹ 105,944.00
Net Payable		₹ 105,944.00
Advance Amount		₹ 50,000.00
Received Amount		₹ 55,944.00

Received Amount in Words : One Lakh Five Thousand Nine Hundred Forty-Four Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	21/01/2024	MMH/MH/RECH2024002	UPI	Advance Amount	50,000.00
2	25/01/2024	MMH/MH/REDH2024018	CARD	Collected Amount	50,000.00
3	25/01/2024	MMH/MH/REDH2024018	UPI	Collected Amount	5,944.00