

IN PATIENT SUMMARY BILL

UHID : MMH202472856

IP No : IP2024000085

Patient name : Mrs.NABANITA BISWAS

Age : 45 Y 11 M 11 D/Female

Bill No : MMH/MH/IP202400094

Bill Date : 12/01/2024

DOA : 11/1/2024 11:10AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.ARUN KUMAR.I

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 1,100.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 700.00
4	EQUIPMENT	₹ 5,000.00
5	LABORATORY	₹ 120.00
6	NURSING CHARGE	₹ 750.00
7	OPERATION THEATRE CHARGES	₹ 7,650.00
8	PHARMACY CHARGE	₹ 12,097.00
9	PHYSIOTHERAPY	₹ 500.00
10	PROFESSIONAL TEAM FEES	₹ 46,733.00
Gross Amount		₹ 75,000.00
Net Payable		₹ 75,000.00
Received Amount		₹ 75,000.00

Received Amount in Words : Seventy-Five Thousand Only

KARTHIK C

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	12/01/2024	MMH/MH/REDH2024008	CARD	Collected Amount	70,000.00
2	12/01/2024	MMH/MH/REDH2024008	CASH	Collected Amount	5,000.00