

IN PATIENT SUMMARY BILL

UHID : MMH202473119

IP No : IP2024000141

Patient name : Mrs.GEETHA R

Age : 61 Y 4 M 19 D/Female

Bill No : MMH/MH/IP202400154

Bill Date : 22/01/2024

DOA : 19/1/2024 7:00PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.VENKATACHALAM VEERAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 8,250.00
3	DIET CHARGES	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 2,250.00
5	GENERAL PROCEDURE	₹ 450.00
6	INJECTION CHARGES	₹ 200.00
7	LABORATORY	₹ 132.00
8	NURSING CHARGE	₹ 2,400.00
9	OPERATION THEATRE CHARGES	₹ 17,200.00
10	PROFESSIONAL TEAM FEES	₹ 61,000.00
Gross Amount		₹ 92,732.00
Net Payable		₹ 92,732.00
Advance Amount		₹ 30,000.00
Received Amount		₹ 62,732.00

Received Amount in Words : Ninety-Two Thousand Seven Hundred
Thirty-Two Only

DINESH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	19/01/2024	MMH/MH/RECH2024002	CARD	Advance Amount	30,000.00
2	22/01/2024	MMH/MH/REDH2024015	UPI	Collected Amount	62,732.00