IN PATIENT SUMMARY BILL

UHID : MMH202473185 Bill No : MMH/MH/IP202400247

IP No : IP2024000214 Bill Date : 02/02/2024

Patient name Ms.THAMIZH SELVI P.M DOA 28/1/2024 7:42PM

Age 21 Y 8 M 10 D/Female DOD

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.ANANTH.V

Amount		Description	S.No
350.00	₹	ADMINISTRATION CHARGES	1
21,000.00	₹	BED CHARGES	2
1,500.00	₹	DIET CHARGES	3
3,750.00	₹	DUTY MEDICAL OFFICER CHARGE	4
600.00	₹	EQUIPMENT	5
1,450.00	₹	GENERAL PROCEDURE	6
200.00	₹	INJECTION CHARGES	7
7,296.00	₹	LABORATORY	8
4,000.00	₹	NURSING CHARGE	9
18,050.00	₹	OPERATION THEATRE CHARGES	10
3,000.00	₹	PHYSIOTHERAPY	11
86,500.00	₹	PROFESSIONAL TEAM FEES	12
1,000.00	₹	RADIOLOGY	13

 Gross Amount
 ₹
 148,696.00

 Net Payable
 ₹
 148,696.00

 Advance Amount
 ₹
 90,000.00

 Received Amount
 ₹
 58,696.00

Received Amount in Words : One Lakh Forty-Eight Thousand Six Hundred DINESH

Ninety-Six Only Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	28/01/2024	MMH/MH/RECH2024003	CASH	Advance Amount	50,000.00
2	31/01/2024	MMH/MH/RECH2024003	CASH	Advance Amount	40,000.00
3	02/02/2024	MMH/MH/REDH2024024	CHEQUE	Collected Amount	1,459.00
4	02/02/2024	MMH/MH/REDH2024024	CASH	Collected Amount	57,237.00