

IN PATIENT SUMMARY BILL

UHID : MMH202473402

IP No : IP2024001333

Patient name : Mr.BIJAY DEY

Age : 40 Y 4 M 18 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401280

Bill Date : 17/06/2024

DOA : 15/6/2024 8:39AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 2,200.00
3	DIET CHARGES	₹ 1,500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 1,500.00
5	EQUIPMENT	₹ 500.00
6	LABORATORY	₹ 5,513.00
7	NURSING CHARGE	₹ 1,600.00
8	PHARMACY CHARGE	₹ 12,149.00
9	PROFESSIONAL TEAM FEES	₹ 5,500.00
Gross Amount		₹ 30,812.00
Net Payable		₹ 30,812.00
Received Amount		₹ 30,812.00

Received Amount in Words : Thirty Thousand Eight Hundred Twelve Only

SATHISH KUMAR.S  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/17/2024	MMH/MH/REDH202413007	UPI	Collected Amount	30,000.00
2	6/17/2024	MMH/MH/REDH202413008	CARD	Collected Amount	812.00