

IN PATIENT SUMMARY BILL

UHID : MMH202473615

IP No : IP2024000534

Patient name : Mr.MOHAMED NATHARSHA

Age : 34 Y 9 M 9 D/Male

Bill No : MMH/MH/IP202400535

Bill Date : 09/03/2024

DOA : 8/3/2024 8:35PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 3,850.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 750.00
4	EQUIPMENT	₹ 600.00
5	LABORATORY	₹ 8,246.00
6	NURSING CHARGE	₹ 800.00
7	PROFESSIONAL TEAM FEES	₹ 5,000.00
8	RADIOLOGY	₹ 4,500.00
Gross Amount		₹ 24,096.00
Net Payable		₹ 24,096.00
Advance Amount		₹ 20,000.00
Received Amount		₹ 4,096.00

Received Amount in Words : Twenty-Four Thousand Ninety-Six Only

DINESH

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	08/03/2024	MMH/MH/RECH2024008	UPI	Advance Amount	20,000.00
2	09/03/2024	MMH/MH/REDH2024052	CASH	Collected Amount	4,096.00