

IN PATIENT SUMMARY BILL

UHID : MMH202473625

IP No : IP2024000320

Patient name : Mr.CHINNA PENCHLAIAH

Age : 53 Y 11 M 10 D/Male

Bill No : MMH/MH/IP202400322

Bill Date : 11/02/2024

DOA : 9/2/2024 1:38PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 2,200.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,500.00
4	EQUIPMENT	₹ 2,450.00
5	LABORATORY	₹ 10,267.00
6	NURSING CHARGE	₹ 1,600.00
7	PROFESSIONAL TEAM FEES	₹ 6,000.00
8	RADIOLOGY	₹ 2,925.00
9	ULTRASOUND	₹ 2,000.00
Gross Amount		₹ 29,292.00
Net Payable		₹ 29,292.00
Advance Amount		₹ 5,000.00
Received Amount		₹ 24,292.00

Received Amount in Words : Twenty-Nine Thousand Two Hundred
Ninety-Two Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	09/02/2024	MMH/MH/RECH20240050	CASH	Advance Amount	5,000.00
2	11/02/2024	MMH/MH/REDH20240300	UPI	Collected Amount	24,292.00