

IN PATIENT SUMMARY BILL

UHID : MMH202473786

IP No : IP2024000392

Patient name : Mr.RAGAVAN T V

Age : 79 Y 7 M 23 D/Male

Bill No : MMH/MH/IP202400419

Bill Date : 24/02/2024

DOA : 20/2/2024 10:52AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.SHIVA KUMAR D

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 4,950.00
3	BLOOD COMPONENTS	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,375.00
5	EQUIPMENT	₹ 2,000.00
6	GENERAL PROCEDURE	₹ 500.00
7	LABORATORY	₹ 9,352.00
8	NURSING CHARGE	₹ 3,600.00
9	OPERATION THEATRE CHARGES	₹ 20,650.00
10	PROFESSIONAL TEAM FEES	₹ 31,500.00
11	ULTRASOUND	₹ 2,000.00
Gross Amount		₹ 78,777.00
Net Payable		₹ 78,777.00
Advance Amount		₹ 60,000.00
Received Amount		₹ 18,777.00

Received Amount in Words : Seventy-Eight Thousand Seven Hundred
Seventy-Seven Only

DINESH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	20/02/2024	MMH/MH/RECH2024006	UPI	Advance Amount	10,000.00
2	20/02/2024	MMH/MH/RECH2024006	UPI	Advance Amount	30,000.00
3	23/02/2024	MMH/MH/RECH2024006	CARD	Advance Amount	20,000.00
4	24/02/2024	MMH/MH/REDH2024040	UPI	Collected Amount	18,777.00