

IN PATIENT SUMMARY BILL

UHID : MMH202473952

IP No : IP2024002067

Patient name : Mrs.PADMINI M

Age : 63 Y 0 M 6 D/Female

Consultant Name : Dr.ARUN KUMAR.I

Bill No : MMH/MH/IP202402040

Bill Date : 23/09/2024

DOA : 17/9/2024 5:13PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 25,200.00
3	DIET CHARGES	₹ 4,600.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 4,500.00
5	LABORATORY	₹ 3,876.00
6	MISCELLANEOUS	₹ 50.00
7	NURSING CHARGE	₹ 4,800.00
8	OPERATION THEATRE CHARGES	₹ 17,200.00
9	PHARMACY CHARGE	₹ 106,342.00
10	PHYSIOTHERAPY	₹ 5,600.00
11	PROCEDURE CHARGES	₹ 2,950.00
12	PROFESSIONAL TEAM FEES	₹ 77,000.00
13	RADIOLOGY	₹ 1,120.00
Gross Amount		₹ 253,588.00
Net Payable		₹ 253,588.00
Advance Amount		₹ 200,000.00
Received Amount		₹ 53,588.00

Received Amount in Words : Two Lakh Fifty-Three Thousand Five Hundred Eighty-Eight Only

KARTHICK
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/17/2024	MMH/MH/RECH202403621	CASH	Advance Amount	30,000.00
2	9/17/2024	MMH/MH/RECH202403622	CASH	Advance Amount	50,000.00
3	9/20/2024	MMH/MH/RECH202403663	CASH	Advance Amount	120,000.00
4	9/23/2024	MMH/MH/REDH202420899	CASH	Collected Amount	53,588.00