

IN PATIENT SUMMARY BILL

UHID : MMH202474176

IP No : IP2024000454

Patient name : Mr.ANNAMALAI L

Age : 47 Y 0 M 6 D/Male

Bill No : MMH/MH/IP202400485

Bill Date : 05/03/2024

DOA : 28/2/2024 4:25PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 37,875.00
3	CARDIOLOGY PACKAGE-HEART	₹ 16,000.00
4	DIET CHARGES	₹ 2,800.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 1,125.00
6	EQUIPMENT	₹ 10,500.00
7	GENERAL PROCEDURE	₹ 12,750.00
8	INTENSIVIST CHARGES	₹ 13,500.00
9	LABORATORY	₹ 29,194.00
10	NURSING CHARGE	₹ 10,200.00
11	PHYSIOTHERAPY	₹ 1,400.00
12	PROFESSIONAL TEAM FEES	₹ 9,000.00
13	RADIOLOGY	₹ 14,925.00
14	ULTRASOUND	₹ 2,000.00
Gross Amount		₹ 161,619.00
Net Payable		₹ 161,619.00
Advance Amount		₹ 96,000.00
Received Amount		₹ 65,619.00

Received Amount in Words : One Lakh Sixty-One Thousand Six Hundred Nineteen Only

KARTHIK C  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	28/02/2024	MMH/MH/RECH2024007	CARD	Advance Amount	40,000.00
2	01/03/2024	MMH/MH/RECH2024007	CARD	Advance Amount	56,000.00
3	05/03/2024	MMH/MH/REDH2024049	CARD	Collected Amount	65,619.00