IN PATIENT SUMMARY BILL

UHID : MMH202474189 Bill No : MMH/MH/IP202402119

: IP2024002178 : 02/10/2024 IP No Bill Date

Patient name : Mrs.MALLIKA PURUSHOTHAMAN P : 29/9/2024 4:31PM DOA

: 47 Y 3 M 17 D/Female DOD Age

: CASH Entity Type

: CASH Entity Name

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	8,250.00
3	BLOOD COMPONENTS		₹	2,550.00
4	DIET CHARGES		₹	3,350.00
5	DUTY MEDICAL OFFICER CHARGE		₹	2,250.00
6	LABORATORY		₹	7,766.00
7	NURSING CHARGE		₹	2,400.00
8	OPERATION THEATRE CHARGES		₹	13,700.00
9	PHYSIOTHERAPY		₹	1,800.00
10	PROCEDURE CHARGES		₹	500.00
11	PROFESSIONAL TEAM FEES		₹	56,000.00
12	RADIOLOGY		₹	3,555.00
		Gross Amount	₹	102,471.00
		Net Payable	₹	102,471.00

Advance Amount ₹ 45,000.00 **Received Amount** ₹ 57,471.00

Received Amount in Words : One Lakh Two Thousand Four Hundred Seventy-One KARTHICK

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/29/2024	MMH/MH/RECH202403823	UPI	Advance Amount	15,000.00
2	9/30/2024	MMH/MH/RECH202403827	UPI	Advance Amount	30,000.00
3	10/2/2024	MMH/MH/REDH202421664	UPI	Collected Amount	57,471.00