

IN PATIENT SUMMARY BILL

UHID : MMH202474451

IP No : IP2024000987

Patient name : Mr.VENKATACHALAM P.S

Age : 63 Y 10 M 24 D/Male

Bill No : MMH/MH/IP202400982

Bill Date : 06/05/2024

DOA : 30/4/2024 11:44AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 27,300.00
3	DIET CHARGES	₹ 5,950.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 4,875.00
5	EQUIPMENT	₹ 6,500.00
6	LABORATORY	₹ 13,416.00
7	NURSING CHARGE	₹ 5,200.00
8	OPERATION THEATRE CHARGES	₹ 15,000.00
9	PROFESSIONAL TEAM FEES	₹ 76,500.00
10	RADIOLOGY	₹ 2,000.00

Gross Amount₹ 157,091.00

Net Payable₹ 157,091.00

Advance Amount₹ 68,000.00

Received Amount₹ 89,091.00

Received Amount in Words : One Lakh Fifty-Seven Thousand Ninety-One Only

KARTHICK.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	30/04/2024	MMH/MH/RECH2024015	UPI	Advance Amount	3,000.00
2	04/05/2024	MMH/MH/RECH2024016	AFFORDPLAN	Advance Amount	15,000.00
3	04/05/2024	MMH/MH/RECH2024016	AFFORDPLAN	Advance Amount	50,000.00
4	06/05/2024	MMH/MH/REDH2024096	CHEQUE	Collected Amount	2,221.00
5	06/05/2024	MMH/MH/REDH2024096	UPI	Collected Amount	86,870.00