

IN PATIENT SUMMARY BILL

UHID : MHI202482913

IP No : IPH2024000620

Patient name : Mr.GANGADHARAN

Age : 41 Y 7 M 0 D/Male

Consultant Name : Dr.G. GNANAVELU

Bill No : MMH/HM/IPH202400600

Bill Date : 15/03/2024

DOA : 14/3/2024 4:54PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 600.00
2	BED CHARGES	₹ 1,500.00
3	CARDIOLOGY PACKAGE-HEART	₹ 16,000.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 800.00
5	GENERAL PROCEDURE	₹ 500.00
6	LABORATORY	₹ 853.00
7	MEDICAL RECORD CHARGE	₹ 200.00
8	NURSING CHARGE	₹ 800.00
9	OP REGISTRATION	₹ 150.00
10	PHARMACY CHARGE	₹ 5,966.00
11	PROFESSIONAL TEAM FEES	₹ 5,000.00
Gross Amount		₹ 32,369.00
Net Payable		₹ 32,369.00
Advance Amount		₹ 32,369.00
Received Amount		₹ 0.00

Received Amount in Words : Thirty-Two Thousand Three Hundred Sixty-Nine Only

PRAVEEN KUMAR
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	14/03/2024	MMH/HM/RECAP2024000620	CARD	Advance Amount	30,000.00
2	15/03/2024	MMH/HM/RECAP2024000620	CARD	Advance Amount	2,369.00