

IN PATIENT SUMMARY BILL

UHID : MMH202474753

IP No : IP2024000626

Patient name : Mr.KANNAPIRAN.K

Age : 70 Y 0 M 7 D/Male

Bill No : MMH/MH/IP202400616

Bill Date : 22/03/2024

DOA : 15/3/2024 7:21PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.DURAI RAVI

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 33,550.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 5,250.00
4	EQUIPMENT	₹ 1,350.00
5	GENERAL PROCEDURE	₹ 1,000.00
6	INJECTION CHARGES	₹ 400.00
7	LABORATORY	₹ 15,276.00
8	NURSING CHARGE	₹ 5,600.00
9	OPERATION THEATRE CHARGES	₹ 21,250.00
10	PROFESSIONAL TEAM FEES	₹ 48,000.00
11	PULMONOLOGIST	₹ 1,500.00
12	RADIOLOGY	₹ 35,480.00
Gross Amount		₹ 169,006.00
Net Payable		₹ 169,006.00
Advance Amount		₹ 70,000.00
Received Amount		₹ 99,006.00

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

DINESH

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	15/03/2024	MMH/MH/RECH2024009	CASH	Advance Amount	20,000.00
2	16/03/2024	MMH/MH/RECH2024009	UPI	Advance Amount	30,000.00
3	19/03/2024	MMH/MH/RECH2024009	UPI	Advance Amount	20,000.00
4	22/03/2024	MMH/MH/REDH2024062	CASH	Collected Amount	99,006.00