

IN PATIENT SUMMARY BILL

UHID : MHI202482952

IP No : IP2024000891

Patient name : Mrs.CHANDRA.K

Age : 43 Y 3 M 12 D/Female

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202400860

Bill Date : 22/04/2024

DOA : 17/4/2024 10:13AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 6,050.00
3	DIET CHARGES	₹ 3,650.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 4,125.00
5	EQUIPMENT	₹ 31,800.00
6	GENERAL PROCEDURE	₹ 1,450.00
7	INJECTION CHARGES	₹ 200.00
8	LABORATORY	₹ 8,399.00
9	NURSING CHARGE	₹ 4,400.00
10	OPERATION THEATRE CHARGES	₹ 19,000.00
11	PROFESSIONAL TEAM FEES	₹ 58,000.00
Gross Amount		₹ 137,424.00
Net Payable		₹ 137,424.00
Advance Amount		₹ 75,000.00
Received Amount		₹ 62,424.00

Received Amount in Words : One Lakh Thirty-Seven Thousand Four Hundred Twenty-Four Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	17/04/2024	MMH/MH/RECH20240140	CASH	Advance Amount	75,000.00
2	22/04/2024	MMH/MH/REDH20240840	CASH	Collected Amount	62,424.00