

IN PATIENT SUMMARY BILL

UHID : MMH202474824

IP No : IP2024000636

Patient name : Mrs.MANIYAMMAL

Age : 80 Y 0 M 4 D/Female

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202400600

Bill Date : 21/03/2024

DOA : 17/3/2024 11:15AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 4,950.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 3,375.00
4	GENERAL PROCEDURE	₹ 1,350.00
5	LABORATORY	₹ 9,791.00
6	NURSING CHARGE	₹ 3,600.00
7	PROFESSIONAL TEAM FEES	₹ 19,500.00
8	RADIOLOGY	₹ 11,425.00
Gross Amount		₹ 54,341.00
Net Payable		₹ 54,341.00
Advance Amount		₹ 10,000.00
Received Amount		₹ 44,341.00

Received Amount in Words : Fifty-Four Thousand Three Hundred Forty-One Only

DINESH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	17/03/2024	MMH/MH/RECH2024009	UPI	Advance Amount	10,000.00
2	21/03/2024	MMH/MH/REDH2024061	CASH	Collected Amount	23,000.00
3	21/03/2024	MMH/MH/REDH2024061	CHEQUE	Collected Amount	1,309.00
4	21/03/2024	MMH/MH/REDH2024061	UPI	Collected Amount	20,032.00