

IN PATIENT SUMMARY BILL

UHID : MMH202475221

IP No : IP2024000698

Patient name : Mr.SUNNY SAM

Age : 60 Y 0 M 5 D/Male

Bill No : MMH/MH/IP202400693

Bill Date : 31/03/2024

DOA : 25/3/2024 7:31PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.RENGAN.R.S

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 12,100.00
3	DIET CHARGES	₹ 100.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 4,500.00
5	EQUIPMENT	₹ 24,000.00
6	LABORATORY	₹ 4,064.00
7	NURSING CHARGE	₹ 4,800.00
8	PHYSIOTHERAPY	₹ 600.00
9	PROFESSIONAL TEAM FEES	₹ 24,000.00
10	RADIOLOGY	₹ 2,400.00
11	TRANSPORT	₹ 1,500.00
Gross Amount		₹ 78,414.00
Net Payable		₹ 78,414.00
Advance Amount		₹ 40,000.00
Received Amount		₹ 38,414.00

Received Amount in Words : Seventy-Eight Thousand Four Hundred Fourteen Only

DINESH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	25/03/2024	MMH/MH/RECH20240106	UPI	Advance Amount	10,000.00
2	27/03/2024	MMH/MH/RECH20240106	UPI	Advance Amount	30,000.00
3	31/03/2024	MMH/MH/REDH2024068	CHEQUE	Collected Amount	1,039.00
4	31/03/2024	MMH/MH/REDH2024068	NEFT	Collected Amount	37,375.00