IN PATIENT SUMMARY BILL

: MMH/HM/IPH202400732 : MHI202483113 UHID Bill No

: IPH2024000733 : 30/03/2024 IP No Bill Date

: Mr.RAJ KUMAR M DOA Patient name : 27/3/2024 3:38PM

: 66 Y 0 M 3 D/Male DOD Age

: CASH Entity Type

: CASH Entity Name

Consultant Name · Dr.G. GNANAVELU

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	600.00
2	BED CHARGES		₹	13,000.00
3	CARDIOLOGY PACKAGE-HEART		₹	16,000.00
4	DIET CHARGES		₹	3,900.00
5	DUTY MEDICAL OFFICER CHARGE		₹	1,600.00
6	EQUIPMENT		₹	2,500.00
7	GENERAL PROCEDURE		₹	500.00
8	INTENSIVIST CHARGES		₹	3,000.00
9	LABORATORY		₹	11,230.50
10	MEDICAL RECORD CHARGE		₹	200.00
11	NURSING CHARGE		₹	4,100.00
12	OP REGISTRATION		₹	150.00
13	PHARMACY CHARGE		₹	18,703.00
14	PROFESSIONAL TEAM FEES		₹	23,249.00
15	RADIOLOGY		₹	1,200.00
		Gross Amount	₹	99.932.50

Gross Amount 99,932.50 Net Payable ₹ 99,933.00 **Advance Amount** ₹ 99,933.00 **Received Amount** 0.00

: Ninety-Nine Thousand Nine Hundred **Received Amount in Words** PRAVEEN KUMAR Thirty-Three Only

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	27/03/2024	MMH/HM/RECAP2024008	CARD	Advance Amount	50,000.00
2	30/03/2024	MMH/HM/RECAP2024008	CARD	Advance Amount	49,933.00