

IN PATIENT SUMMARY BILL

UHID : MHI202483115

IP No : IP2024000724

Patient name : Mr.KUMAR B

Age : 61 Y 9 M 18 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202400659

Bill Date : 28/03/2024

DOA : 27/3/2024 7:34PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 7,500.00
3	BLOOD COMPONENTS	₹ 32,200.00
4	EQUIPMENT	₹ 20,000.00
5	GENERAL PROCEDURE	₹ 500.00
6	INTENSIVIST CHARGES	₹ 3,000.00
7	LABORATORY	₹ 46,027.00
8	NURSING CHARGE	₹ 2,000.00
9	PHYSIOTHERAPY	₹ 700.00
10	PROFESSIONAL TEAM FEES	₹ 7,500.00
11	RADIOLOGY	₹ 14,650.00
Gross Amount		₹ 134,427.00
Net Payable		₹ 134,427.00
Advance Amount		₹ 134,427.00
Received Amount		₹ 0.00

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

KARTHICK
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	27/03/2024	MMH/MH/RECH20240110	UPI	Advance Amount	25,000.00
2	28/03/2024	MMH/MH/RECH20240110	CARD	Advance Amount	75,000.00
3	28/03/2024	MMH/MH/RECH20240110	UPI	Advance Amount	34,427.00