

IN PATIENT SUMMARY BILL

UHID : MMH202475395

IP No : IP2024000756

Patient name : Mr.RAGHVENDRA SHUKLA

Age : 49 Y 9 M 5 D/Male

Bill No : MMH/MH/IP202400775

Bill Date : 10/04/2024

DOA : 1/4/2024 11:28AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.CM THIAGARAJAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 52,500.00
3	BLOOD COMPONENTS	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 42,000.00
5	EQUIPMENT	₹ 18,000.00
6	GENERAL PROCEDURE	₹ 950.00
7	INJECTION CHARGES	₹ 1,352.00
8	LABORATORY	₹ 9,780.00
9	NURSING CHARGE	₹ 77,000.00
10	OPERATION THEATRE CHARGES	₹ 97,550.00
11	PHARMACY CHARGE	₹ 71,084.00
12	RADIOLOGY	₹ 3,600.00
Gross Amount		₹ 374,666.00
Net Payable		₹ 374,666.00
Received Amount		₹ 406,666.00
Refund Amount		₹ 32,000.00

Received Amount in Words : Four Lakh Six Thousand Six Hundred Sixty-Six Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/04/2024	MMH/MH/REDH2024075	CHEQUE	Collected Amount	406,666.00