

IN PATIENT SUMMARY BILL

UHID : MMH202475482

IP No : IP2024001379

Patient name : Mrs.SELVI.V

Age : 58 Y 10 M 0 D/Female

Consultant Name : Dr.SHIVA KUMAR D

Bill No : MMH/MH/IP202401313

Bill Date : 20/06/2024

DOA : 19/6/2024 5:31PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 5,775.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,125.00
4	EQUIPMENT	₹ 1,500.00
5	GENERAL PROCEDURE	₹ 976.00
6	INJECTION CHARGES	₹ 200.00
7	LABORATORY	₹ 2,124.00
8	NURSING CHARGE	₹ 1,200.00
9	OPERATION THEATRE CHARGES	₹ 12,150.00
10	PROFESSIONAL TEAM FEES	₹ 26,500.00
11	RADIOLOGY	₹ 1,000.00
Gross Amount		₹ 52,900.00
Net Payable		₹ 52,900.00
Advance Amount		₹ 40,000.00
Received Amount		₹ 12,900.00

Received Amount in Words : Fifty-Two Thousand Nine Hundred Only

SATHISH KUMAR.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/19/2024	MMH/MH/RECH202402261	CASH	Advance Amount	10,000.00
2	6/19/2024	MMH/MH/RECH202402264	CASH	Advance Amount	30,000.00
3	6/20/2024	MMH/MH/REDH202413282	CASH	Collected Amount	12,900.00