

IN PATIENT SUMMARY BILL

UHID : MMH202475611

IP No : IP2024000832

Patient name : Mrs.SHOBANA S

Age : 32 Y 2 M 3 D/Female

Consultant Name : Dr.DIVYA PRAKASH

Bill No : MMH/MH/IP202400778

Bill Date : 10/04/2024

DOA : 9/4/2024 9:53AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 1,650.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,125.00
4	EQUIPMENT	₹ 17,500.00
5	GENERAL PROCEDURE	₹ 500.00
6	INJECTION CHARGES	₹ 200.00
7	LABORATORY	₹ 2,997.00
8	NURSING CHARGE	₹ 1,200.00
9	OPERATION THEATRE CHARGES	₹ 16,600.00
10	PROFESSIONAL TEAM FEES	₹ 32,000.00
11	RADIOLOGY	₹ 925.00
Gross Amount		₹ 75,047.00
Net Payable		₹ 75,047.00
Advance Amount		₹ 30,000.00
Received Amount		₹ 45,047.00

Received Amount in Words :

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	09/04/2024	MMH/MH/RECH20240130	CARD	Advance Amount	30,000.00
2	10/04/2024	MMH/MH/REDH2024076	CARD	Collected Amount	25,000.00
3	10/04/2024	MMH/MH/REDH2024076	UPI	Collected Amount	20,047.00