

IN PATIENT SUMMARY BILL

UHID : MMH202475913

IP No : IP2024000898

Patient name : Mrs.NAMITA MONDAL

Age : 55 Y 0 M 6 D/Female

Consultant Name : Dr.ARUN KUMAR.I

Bill No : MMH/MH/IP202400880

Bill Date : 24/04/2024

DOA : 18/4/2024 6:34PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 5,500.00
3	BLOOD COMPONENTS	₹ 5,100.00
4	DIET CHARGES	₹ 500.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 3,750.00
6	GENERAL PROCEDURE	₹ 1,850.00
7	INJECTION CHARGES	₹ 600.00
8	LABORATORY	₹ 1,118.00
9	NURSING CHARGE	₹ 4,000.00
10	OPERATION THEATRE CHARGES	₹ 29,350.00
11	PHARMACY CHARGE	₹ 132,398.00
12	PHYSIOTHERAPY	₹ 2,500.00
13	PROFESSIONAL TEAM FEES	₹ 126,409.00
14	RADIOLOGY	₹ 1,575.00
Gross Amount		₹ 315,000.00
Net Payable		₹ 315,000.00
Advance Amount		₹ 250,000.00
Received Amount		₹ 65,000.00

Received Amount in Words : Three Lakh Fifteen Thousand Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	20/04/2024	MMH/MH/RECH2024014'	CARD	Advance Amount	30,000.00
2	23/04/2024	MMH/MH/RECH2024014'	CARD	Advance Amount	100,000.00
3	24/04/2024	MMH/MH/RECH2024014'	CARD	Advance Amount	20,000.00
4	24/04/2024	MMH/MH/RECH2024014'	UPI	Advance Amount	100,000.00
5	24/04/2024	MMH/MH/REDH2024085'	CASH	Collected Amount	65,000.00