IN PATIENT SUMMARY BILL

UHID	:	MMH202475996	Bill No	:	MMH/MH/IP202400930
IP No	:	IP2024000915	Bill Date	:	29/04/2024
Patient name	:	Mrs.GEETHA CHANDRASEKARAN	DOA	:	21/4/2024 12:15AM
Age	:	59 Y 10 M 19 D/Female	DOD	:	
			Entity Type	:	CASH
			Entity Name	:	CASH
Consultant Name	:	Dr.SUPRAJA K			

S.No	Description		Amount
1	ADMINISTRATION CHARGES	₹	350.00
2	BED CHARGES	₹	54,300.00
3	DIET CHARGES	₹	5,000.00
4	DUTY MEDICAL OFFICER CHARGE	₹	3,000.00
5	EQUIPMENT	₹	97,400.00
6	GENERAL PROCEDURE	₹	13,000.00
7	INTENSIVIST CHARGES	₹	15,000.00
8	LABORATORY	₹	56,289.00
9	NURSING CHARGE	₹	13,200.00
10	PACKAGE	₹	10,000.00
11	PHARMACY CHARGE	₹	53,394.00
12	PHYSIOTHERAPY	₹	1,400.00
13	PROFESSIONAL TEAM FEES	₹	43,000.00
14	PULMONOLOGIST	₹	1,500.00
15	RADIOLOGY	₹	12,630.00
	Gross Amount	₹	**379,463.00**
	Net Payable	₹	**379,463.00**
	Advance Amount	₹	**289,000.00**
	Received Amount	₹	**90,463.00**

Received Amount in Words : Three Lakh Seventy-Nine Thousand Four Hundred Sixty-Three Only

SRINIVASAN
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	21/04/2024	MMH/MH/RECH2024014	CARD	Advance Amount	10,000.00
2	21/04/2024	MMH/MH/RECH2024014	UPI	Advance Amount	4,000.00
3	25/04/2024	MMH/MH/RECH2024015	NEFT	Advance Amount	49,000.00
4	25/04/2024	MMH/MH/RECH2024015	UPI	Advance Amount	50,000.00
5	25/04/2024	MMH/MH/RECH2024015	NEFT	Advance Amount	1,000.00
6	29/04/2024	MMH/MH/RECH2024015	CARD	Advance Amount	175,000.00
7	29/04/2024	MMH/MH/REDH2024090	NEFT	Collected Amount	90,463.00