

IN PATIENT SUMMARY BILL

UHID : MHI202483613

IP No : IPH2024001017

Patient name : Mr.DHANASEKARAN

Age : 61 Y 1 M 14 D/Male

Bill No : MMH/HM/IPH202400998

Bill Date : 27/04/2024

DOA : 27/4/2024 10:19AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.G. GNANAVELU

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 9,947.00
2	PHARMACY CHARGE	₹ 6,053.00
Gross Amount		₹ 16,000.00
Net Payable		₹ 16,000.00
Advance Amount		₹ 16,000.00
Received Amount		₹ 0.00

Received Amount in Words : Sixteen Thousand Only

PRAVEEN

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	27/04/2024	MMH/HM/RECAP2024011	CARD	Advance Amount	16,000.00