

IN PATIENT SUMMARY BILL

UHID : MMH202476512

IP No : IP2024001074

Patient name : Mrs.DISHA

Age : 33 Y 0 M 7 D/Female

Consultant Name : Dr.VIJAYAN.J

Bill No : MMH/MH/IP202401041

Bill Date : 13/05/2024

DOA : 10/5/2024 11:04AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 11,550.00
3	DIET CHARGES	₹ 2,000.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 2,250.00
5	EQUIPMENT	₹ 23,700.00
6	GENERAL PROCEDURE	₹ 500.00
7	INJECTION CHARGES	₹ 200.00
8	LABORATORY	₹ 12,180.00
9	NURSING CHARGE	₹ 2,400.00
10	OPERATION THEATRE CHARGES	₹ 20,600.00
11	PROFESSIONAL TEAM FEES	₹ 65,000.00
12	RADIOLOGY	₹ 3,000.00
Gross Amount		₹ 143,730.00
Net Payable		₹ 143,730.00
Advance Amount		₹ 30,000.00
Received Amount		₹ 113,730.00

Received Amount in Words : One Lakh Forty-Three Thousand Seven Hundred Thirty Only

SATHISH KUMAR.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/05/2024	MMH/MH/RECH2024017	CASH	Advance Amount	10,000.00
2	10/05/2024	MMH/MH/RECH2024017	AFFORDPLAN	Advance Amount	20,000.00
3	13/05/2024	MMH/MH/REDH2024100	AFFORDPLAN	Collected Amount	48,730.00
4	13/05/2024	MMH/MH/REDH2024100	CASH	Collected Amount	30,000.00
5	13/05/2024	MMH/MH/REDH2024100	CARD	Collected Amount	35,000.00