

IN PATIENT SUMMARY BILL

UHID : MMH202476551

IP No : IP2024001068

Patient name : Mrs.MEENAKSHI DEVI V

Age : 77 Y 7 M 8 D/Female

Consultant Name : Dr.ARUNKUMAR.I

Bill No : MMH/MH/IP202401046

Bill Date : 13/05/2024

DOA : 9/5/2024 3:23PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 19,800.00
3	DIET CHARGES	₹ 3,000.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,000.00
5	GENERAL PROCEDURE	₹ 500.00
6	LABORATORY	₹ 15,042.00
7	NURSING CHARGE	₹ 3,200.00
8	OPERATION THEATRE CHARGES	₹ 13,550.00
9	PHYSIOTHERAPY	₹ 2,400.00
10	PROFESSIONAL TEAM FEES	₹ 43,500.00
11	RADIOLOGY	₹ 3,660.00
12	TRANSPORT	₹ 7,000.00
Gross Amount		₹ 115,002.00
Net Payable		₹ 115,002.00
Advance Amount		₹ 75,000.00
Received Amount		₹ 40,002.00

Received Amount in Words : One Lakh Fifteen Thousand Two Only

SATHISH KUMAR.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	09/05/2024	MMH/MH/RECH20240170	CARD	Advance Amount	25,000.00
2	11/05/2024	MMH/MH/RECH20240170	CARD	Advance Amount	50,000.00
3	13/05/2024	MMH/MH/REDH20241017	CARD	Collected Amount	40,002.00