

IN PATIENT SUMMARY BILL

UHID : MMH202477200

IP No : IP2024001184

Patient name : Mrs.VASUKI S

Age : 59 Y 2 M 4 D/Female

Consultant Name : Dr.BASHEER AHMED ORTHO

Bill No : MMH/MH/IP202401157

Bill Date : 29/05/2024

DOA : 26/5/2024 7:41PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 3,300.00
3	DIET CHARGES	₹ 1,500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 1,500.00
5	GENERAL PROCEDURE	₹ 950.00
6	LABORATORY	₹ 1,104.00
7	NURSING CHARGE	₹ 1,500.00
8	OPERATION THEATRE CHARGES	₹ 11,500.00
9	PHYSIOTHERAPY	₹ 600.00
10	PROFESSIONAL TEAM FEES	₹ 29,000.00
11	RADIOLOGY	₹ 750.00
12	TRANSPORT	₹ 1,500.00
Gross Amount		₹ 53,554.00
Net Payable		₹ 53,554.00
Advance Amount		₹ 30,000.00
Received Amount		₹ 23,554.00

Received Amount in Words : Fifty-Three Thousand Five Hundred Fifty-Four Only

KARTHICK.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	29/05/2024	MMH/MH/RECH20240195	CHEQUE	Advance Amount	30,000.00
2	29/05/2024	MMH/MH/REDH20241155	CARD	Collected Amount	23,554.00