

IN PATIENT SUMMARY BILL

UHID : MMH202477235

IP No : IP2024001174

Patient name : Mr.ANBUMUTHU M P

Age : 84 Y 1 M 18 D/Male

Bill No : MMH/MH/IP202401139

Bill Date : 27/05/2024

DOA : 24/5/2024 4:19PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.BALAJI.P.S

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 12,600.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 2,250.00
4	GENERAL PROCEDURE	₹ 1,000.00
5	LABORATORY	₹ 8,700.00
6	NURSING CHARGE	₹ 2,400.00
7	OPERATION THEATRE CHARGES	₹ 20,200.00
8	PHYSIOTHERAPY	₹ 1,200.00
9	PROFESSIONAL TEAM FEES	₹ 57,000.00
10	RADIOLOGY	₹ 3,840.00
Gross Amount		₹ 109,540.00
Net Payable		₹ 109,540.00
Advance Amount		₹ 109,540.00
Received Amount		₹ 0.00

Received Amount in Words : One Lakh Nine Thousand Five Hundred Forty Only

KARTHICK.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	24/05/2024	MMH/MH/RECH20240190	CARD	Advance Amount	30,000.00
2	27/05/2024	MMH/MH/RECH20240190	UPI	Advance Amount	29,540.00
3	27/05/2024	MMH/MH/RECH20240190	CARD	Advance Amount	50,000.00