## IN PATIENT SUMMARY BILL

UHID : MMH202477340 Bill No : MMH/MH/IP202401225

: 08/06/2024 : IP2024001211 IP No Bill Date

Patient name : Mrs.MAMTA SAHIS : 29/5/2024 10:19AM DOA

DOD : 68 Y 5 M 8 D/Female Age

: CASH Entity Type

: CASH Entity Name

Consultant Name : Dr.M.VIGNESH

S.No	Description			Amount
1	ADMINISTRATION CHARGES	₹	350.00	
2	BED CHARGES		₹	3,850.00
3	DIET CHARGES		₹	1,500.00
4	DUTY MEDICAL OFFICER CHARGE		₹	2,625.00
5	EQUIPMENT		₹	7,500.00
6	INJECTION CHARGES		₹	400.00
7	LABORATORY		₹	4,358.00
8	NURSING CHARGE		₹	2,800.00
9	OPERATION THEATRE CHARGES		₹	19,600.00
10	PHARMACY CHARGE		₹	33,373.00
11	PROFESSIONAL TEAM FEES		₹	70,719.00
12	RADIOLOGY		₹	16,925.00
		Gross Amount	₹	164,000.00
		Net Payable	₹	164,000.00

**Advance Amount** ₹ 110,000.00 **Received Amount** ₹ 54,000.00

**Received Amount in Words** : One Lakh Sixty-Four Thousand Only SATHISH KUMAR.S

**Authorised Signature** 

## **Payment History**

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	5/31/2024	MMH/MH/RECH202402014	UPI	Advance Amount	50,000.00
2	5/31/2024	MMH/MH/RECH202402015	CARD	Advance Amount	30,000.00
3	6/1/2024	MMH/MH/RECH202402027	CARD	Advance Amount	30,000.00
4	6/8/2024	MMH/MH/REDH202412304	CASH	Collected Amount	54,000.00