

IN PATIENT SUMMARY BILL

UHID : MMH202477674

IP No : IP2024001282

Patient name : Mr.SORAV JAIN

Age : 28 Y 0 M 1 D/Male

Consultant Name : Dr.ARUN KUMAR.I

Bill No : MMH/MH/IP202401233

Bill Date : 09/06/2024

DOA : 6/6/2024 11:45PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 14,850.00
3	DIET CHARGES	₹ 1,000.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 2,250.00
5	EQUIPMENT	₹ 5,000.00
6	LABORATORY	₹ 7,500.00
7	NURSING CHARGE	₹ 2,400.00
8	OPERATION THEATRE CHARGES	₹ 13,650.00
9	PHYSIOTHERAPY	₹ 1,800.00
10	PROFESSIONAL TEAM FEES	₹ 75,000.00
11	RADIOLOGY	₹ 1,000.00
Gross Amount		₹ 124,800.00
Net Payable		₹ 124,800.00
Received Amount		₹ 124,800.00

Received Amount in Words : One Lakh Twenty-Four Thousand Eight Hundred Only

SATHISH KUMAR.S  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/9/2024	MMH/MH/REDH202412360	CARD	Collected Amount	124,800.00