

IN PATIENT SUMMARY BILL

UHID : MHP202400857

IP No : IP2024001361

Patient name : Mr.VISWANATHAN P

Age : 60 Y 0 M 3 D/Male

Consultant Name : Dr.SUPRAJA K

Bill No : MMH/MH/IP202401318

Bill Date : 21/06/2024

DOA : 18/6/2024 12:22PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 17,325.00
3	DIET CHARGES	₹ 2,300.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 2,625.00
5	EQUIPMENT	₹ 900.00
6	LABORATORY	₹ 16,680.00
7	NURSING CHARGE	₹ 2,800.00
8	PROFESSIONAL TEAM FEES	₹ 10,000.00
9	RADIOLOGY	₹ 6,700.00
Gross Amount		₹ 59,680.00
Net Payable		₹ 59,680.00
Advance Amount		₹ 20,000.00
Received Amount		₹ 39,680.00

Received Amount in Words : Fifty-Nine Thousand Six Hundred Eighty Only

SATHISH KUMAR.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/18/2024	MMH/MH/RECH202402241	CARD	Advance Amount	20,000.00
2	6/21/2024	MMH/MH/REDH202413335	CARD	Collected Amount	39,680.00