

IN PATIENT SUMMARY BILL

UHID : MHP202400876

IP No : IP2024001408

Patient name : Mrs.WAFIYA AZEEMA V

Age : 22 Y 9 M 22 D/Female

Consultant Name : Dr.SUPRAJA K

Bill No : MMH/MH/IP202401365

Bill Date : 26/06/2024

DOA : 23/6/2024 7:49AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 22,700.00
3	DIET CHARGES	₹ 2,500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 1,500.00
5	EQUIPMENT	₹ 2,000.00
6	GENERAL PROCEDURE	₹ 750.00
7	INTENSIVIST CHARGES	₹ 6,000.00
8	LABORATORY	₹ 4,710.00
9	NURSING CHARGE	₹ 5,600.00
10	PROFESSIONAL TEAM FEES	₹ 16,000.00
11	RADIOLOGY	₹ 2,620.00
Gross Amount		₹ 64,730.00
Net Payable		₹ 64,730.00
Advance Amount		₹ 30,000.00
Received Amount		₹ 34,730.00

Received Amount in Words : Sixty-Four Thousand Seven Hundred Thirty Only

SUDHA.M
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/23/2024	MMH/MH/RECH202402324	CARD	Advance Amount	30,000.00
2	6/26/2024	MMH/MH/REDH202413673	CHEQUE	Collected Amount	1,495.00
3	6/26/2024	MMH/MH/REDH202413674	CARD	Collected Amount	33,235.00