

IN PATIENT SUMMARY BILL

UHID : MMH202478481

IP No : IP2024001416

Patient name : Mr.DANIEL LIVINGSTON RAJENDRAN

Age : 22 Y 1 M 14 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401378

Bill Date : 27/06/2024

DOA : 24/6/2024 1:29PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 10,500.00
3	DIET CHARGES	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 1,875.00
5	EQUIPMENT	₹ 600.00
6	LABORATORY	₹ 30,360.00
7	NURSING CHARGE	₹ 2,000.00
8	PHARMACY CHARGE	₹ 2,990.00
9	PROFESSIONAL TEAM FEES	₹ 9,000.00
10	RADIOLOGY	₹ 11,000.00
Gross Amount		₹ 69,175.00
Net Payable		₹ 69,175.00
Received Amount		₹ 69,175.00

Received Amount in Words : Sixty-Nine Thousand One Hundred Seventy-Five Only

SUDHA.M
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/27/2024	MMH/MH/REDH202413780	CARD	Collected Amount	69,175.00