

IN PATIENT SUMMARY BILL

UHID : MMH202478575

IP No : IP2024001769

Patient name : Mrs.PARVATHY G

Age : 82 Y 2 M 8 D/Female

Consultant Name : Dr.ARUN KUMAR.I

Bill No : MMH/MH/IP202401744

Bill Date : 14/08/2024

DOA : 7/8/2024 2:01PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 7,700.00
3	BLOOD COMPONENTS	₹ 8,700.00
4	DIALYSIS / DIALYZER	₹ 5,200.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 5,250.00
6	LABORATORY	₹ 5,788.00
7	NURSING CHARGE	₹ 5,600.00
8	OPERATION THEATRE CHARGES	₹ 13,850.00
9	PHYSIOTHERAPY	₹ 4,000.00
10	PROFESSIONAL TEAM FEES	₹ 46,000.00
11	RADIOLOGY	₹ 3,503.00
12	TRANSPORT	₹ 3,000.00
Gross Amount		₹ 108,941.00
Net Payable		₹ 108,941.00
Advance Amount		₹ 90,000.00
Received Amount		₹ 18,941.00

Received Amount in Words : One Lakh Eight Thousand Nine Hundred Forty-One Only

KARTHICK  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/7/2024	MMH/MH/RECH202403032	CARD	Advance Amount	30,000.00
2	8/10/2024	MMH/MH/RECH202403078	CASH	Advance Amount	60,000.00
3	8/14/2024	MMH/MH/REDH202417821	CARD	Collected Amount	18,941.00