

IN PATIENT SUMMARY BILL

UHID : MMH202478619

IP No : IP2024001442

Patient name : Mr.GIRIRAJ KUMAR P

Age : 50 Y 0 M 17 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401385

Bill Date : 28/06/2024

DOA : 27/6/2024 3:38PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 3,850.00
3	DIET CHARGES	₹ 1,000.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 750.00
5	LABORATORY	₹ 6,804.00
6	NURSING CHARGE	₹ 800.00
7	PROFESSIONAL TEAM FEES	₹ 3,500.00
8	RADIOLOGY	₹ 4,400.00
Gross Amount		₹ 21,454.00
Net Payable		₹ 21,454.00
Advance Amount		₹ 5,000.00
Received Amount		₹ 16,454.00

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

KARTHICK.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/27/2024	MMH/MH/RECH202402383	CARD	Advance Amount	5,000.00
2	6/28/2024	MMH/MH/REDH202413888	CHEQUE	Collected Amount	2,914.00
3	6/28/2024	MMH/MH/REDH202413889	CARD	Collected Amount	13,540.00