

IN PATIENT SUMMARY BILL

UHID : MMH202478672

IP No : IP2024001455

Patient name : Mrs.NANA CHAKMA

Age : 42 Y 5 M 22 D/Female

Bill No : MMH/MH/IP202401418

Bill Date : 02/07/2024

DOA : 29/6/2024 8:26AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.ANUSHA RAAJ

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 2,200.00
3	DIET CHARGES	₹ 1,000.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 1,500.00
5	EQUIPMENT	₹ 15,000.00
6	GENERAL PROCEDURE	₹ 500.00
7	INJECTION CHARGES	₹ 200.00
8	LABORATORY	₹ 4,326.00
9	NURSING CHARGE	₹ 1,600.00
10	OPERATION THEATRE CHARGES	₹ 21,150.00
11	PHARMACY CHARGE	₹ 17,849.00
12	PROFESSIONAL TEAM FEES	₹ 42,325.00
Gross Amount		₹ 108,000.00
Net Payable		₹ 108,000.00
Advance Amount		₹ 55,200.00
Received Amount		₹ 52,800.00

Received Amount in Words : One Lakh Eight Thousand Only

SATHISH KUMAR.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/29/2024	MMH/MH/RECH202402407	CARD	Advance Amount	50,000.00
2	6/29/2024	MMH/MH/RECH202402409	CARD	Advance Amount	5,200.00
3	7/2/2024	MMH/MH/REDH202414163	CARD	Collected Amount	25,000.00
4	7/2/2024	MMH/MH/REDH202414164	CASH	Collected Amount	27,800.00