

IN PATIENT SUMMARY BILL

UHID : MMH202478914

IP No : IP2024001502

Patient name : Mr.RUPENDRAN N

Age : 37 Y 3 M 2 D/Male

Consultant Name : Dr.ARUN KUMAR.I

Bill No : MMH/MH/IP202401458

Bill Date : 09/07/2024

DOA : 5/7/2024 1:44PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 19,250.00
3	BLOOD COMPONENTS	₹ 5,100.00
4	DIET CHARGES	₹ 2,900.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 3,750.00
6	GENERAL PROCEDURE	₹ 950.00
7	LABORATORY	₹ 9,275.00
8	NURSING CHARGE	₹ 4,000.00
9	OPERATION THEATRE CHARGES	₹ 19,050.00
10	PHYSIOTHERAPY	₹ 2,400.00
11	PROFESSIONAL TEAM FEES	₹ 67,000.00
12	RADIOLOGY	₹ 2,440.00
13	TRANSPORT	₹ 4,000.00
Gross Amount		₹ 140,465.00
Net Payable		₹ 140,465.00
Advance Amount		₹ 70,000.00
Received Amount		₹ 70,465.00

Received Amount in Words : One Lakh Forty Thousand Four Hundred Sixty-Five Only

SUDHA.M  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/5/2024	MMH/MH/RECH202402516	CASH	Advance Amount	8,500.00
2	7/5/2024	MMH/MH/RECH202402517	UPI	Advance Amount	11,500.00
3	7/10/2024	MMH/MH/RECH202402573	CARD	Advance Amount	50,000.00
4	7/10/2024	MMH/MH/REDH202414952	CASH	Collected Amount	70,465.00