

IN PATIENT SUMMARY BILL

UHID : MMH202479098

IP No : IP2024001551

Patient name : Mr.JOYDIP NATH

Age : 30 Y 9 M 13 D/Male

Consultant Name : Dr.ARUN KUMAR.I

Bill No : MMH/MH/IP202401473

Bill Date : 12/07/2024

DOA : 11/7/2024 8:12AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 1,100.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 750.00
4	EQUIPMENT	₹ 5,000.00
5	LABORATORY	₹ 126.00
6	NURSING CHARGE	₹ 800.00
7	OPERATION THEATRE CHARGES	₹ 14,700.00
8	PHARMACY CHARGE	₹ 43,174.00
9	PHYSIOTHERAPY	₹ 500.00
10	PROFESSIONAL TEAM FEES	₹ 38,500.00
Gross Amount		₹ 105,000.00
Net Payable		₹ 105,000.00
Advance Amount		₹ 50,000.00
Received Amount		₹ 55,000.00

Received Amount in Words : One Lakh Five Thousand Only

SATHISH KUMAR.S  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/11/2024	MMH/MH/RECH202402583	CASH	Advance Amount	50,000.00
2	7/12/2024	MMH/MH/REDH202415153	CASH	Collected Amount	55,000.00