

IN PATIENT SUMMARY BILL

UHID : MMH202479113

IP No : IP2024001538

Patient name : Mr.MURALI A

Age : 43 Y 3 M 1 D/Male

Consultant Name : Dr.BALAMURUGAN.S

Bill No : MMH/MH/IP202401504

Bill Date : 15/07/2024

DOA : 9/7/2024 3:43PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 6,600.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 4,500.00
4	GENERAL PROCEDURE	₹ 1,900.00
5	INJECTION CHARGES	₹ 200.00
6	LABORATORY	₹ 126.00
7	NURSING CHARGE	₹ 4,800.00
8	OPERATION THEATRE CHARGES	₹ 26,050.00
9	PHYSIOTHERAPY	₹ 2,500.00
10	PROFESSIONAL TEAM FEES	₹ 98,000.00
11	RADIOLOGY	₹ 630.00
Gross Amount		₹ 145,656.00
Net Payable		₹ 145,656.00
Advance Amount		₹ 100,000.00
Received Amount		₹ 45,656.00

Received Amount in Words : One Lakh Forty-Five Thousand Six Hundred Fifty-Six Only

SUDHA.M
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/9/2024	MMH/MH/RECH202402561	CASH	Advance Amount	50,000.00
2	7/15/2024	MMH/MH/RECH202402661	CARD	Advance Amount	50,000.00
3	7/15/2024	MMH/MH/REDH202415384	CHEQUE	Collected Amount	1,801.00
4	7/15/2024	MMH/MH/REDH202415385	CARD	Collected Amount	43,855.00