

IN PATIENT SUMMARY BILL

UHID : MMH202479300

IP No : IP2024001635

Patient name : Mr.SUNDARESAN.P

Age : 85 Y 0 M 7 D/Male

Consultant Name : Dr.YUVARAJ K

Bill No : MMH/MH/IP202401568

Bill Date : 22/07/2024

DOA : 20/7/2024 2:42PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 9,900.00
3	DIET CHARGES	₹ 1,500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 1,500.00
5	EQUIPMENT	₹ 8,250.00
6	GENERAL PROCEDURE	₹ 1,000.00
7	INJECTION CHARGES	₹ 200.00
8	LABORATORY	₹ 10,416.00
9	NURSING CHARGE	₹ 1,600.00
10	OPERATION THEATRE CHARGES	₹ 11,000.00
11	PROFESSIONAL TEAM FEES	₹ 40,000.00
12	RADIOLOGY	₹ 3,120.00
13	TRANSPORT	₹ 1,500.00
Gross Amount		₹ 90,336.00
Net Payable		₹ 90,336.00
Advance Amount		₹ 30,000.00
Received Amount		₹ 60,336.00

Received Amount in Words : Ninety Thousand Three Hundred Thirty-Six Only

KARTHICK.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/20/2024	MMH/MH/RECH202402760	CARD	Advance Amount	30,000.00
2	7/22/2024	MMH/MH/REDH202415981	CARD	Collected Amount	60,336.00