

IN PATIENT SUMMARY BILL

UHID : MMH202479802

IP No : IP2024001669

Patient name : Mrs.RAMA G

Age : 51 Y 2 M 13 D/Female

Consultant Name : Dr.VIJAYAN.J

Bill No : MMH/MH/IP202401635

Bill Date : 30/07/2024

DOA : 25/7/2024 11:05AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 5,500.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 3,750.00
4	EQUIPMENT	₹ 22,500.00
5	GENERAL PROCEDURE	₹ 1,650.00
6	INJECTION CHARGES	₹ 200.00
7	LABORATORY	₹ 11,178.00
8	NURSING CHARGE	₹ 4,000.00
9	OPERATION THEATRE CHARGES	₹ 13,150.00
10	PHYSIOTHERAPY	₹ 600.00
11	PROFESSIONAL TEAM FEES	₹ 55,000.00
12	RADIOLOGY	₹ 2,925.00
Gross Amount		₹ 120,803.00
Net Payable		₹ 120,803.00
Advance Amount		₹ 100,000.00
Received Amount		₹ 20,803.00

Received Amount in Words : One Lakh Twenty Thousand Eight Hundred Three Only

SATHISH KUMAR.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/25/2024	MMH/MH/RECH202402829	CARD	Advance Amount	30,000.00
2	7/26/2024	MMH/MH/RECH202402841	CARD	Advance Amount	30,000.00
3	7/29/2024	MMH/MH/RECH202402884	CASH	Advance Amount	40,000.00
4	7/30/2024	MMH/MH/REDH202416603	CHEQUE	Collected Amount	1,811.00
5	7/30/2024	MMH/MH/REDH202416604	CASH	Collected Amount	18,992.00