

IN PATIENT SUMMARY BILL

UHID : MMH202480141

IP No : IP2024001882

Patient name : Mr.MOHAMMED SHAFIULLAH

Age : 68 Y 0 M 23 D/Male

Bill No : MMH/MH/IP202401831

Bill Date : 26/08/2024

DOA : 22/8/2024 7:20AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.BALAMURUGAN.S

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 19,250.00
3	DIET CHARGES	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,000.00
5	EQUIPMENT	₹ 300.00
6	GENERAL PROCEEDURE	₹ 1,450.00
7	INJECTION CHARGES	₹ 200.00
8	LABORATORY	₹ 1,728.00
9	NURSING CHARGE	₹ 3,200.00
10	OPERATION THEATRE CHARGES	₹ 48,050.00
11	PHYSIOTHERAPY	₹ 2,400.00
12	PROFESSIONAL TEAM FEES	₹ 87,500.00
13	RADIOLOGY	₹ 1,320.00
Gross Amount		₹ 169,248.00
Net Payable		₹ 169,248.00
Advance Amount		₹ 125,000.00
Received Amount		₹ 44,248.00

Received Amount in Words : One Lakh Sixty-Nine Thousand Two Hundred Forty-Eight Only

SUDHA  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/22/2024	MMH/MH/RECH202403240	CARD	Advance Amount	25,000.00
2	8/22/2024	MMH/MH/RECH202403246	CARD	Advance Amount	100,000.00
3	8/26/2024	MMH/MH/REDH202418605	CARD	Collected Amount	44,248.00