

IN PATIENT SUMMARY BILL

UHID : MMH202480500

IP No : IP2024001801

Patient name : Mr.PANDIAN R

Age : 49 Y 0 M 9 D/Male

Consultant Name : Dr.BOOPATHY.D

Bill No : MMH/MH/IP202401776

Bill Date : 19/08/2024

DOA : 12/8/2024 4:45PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 7,700.00
3	DIET CHARGES	₹ 7,500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 5,250.00
5	EQUIPMENT	₹ 8,000.00
6	LABORATORY	₹ 30,181.00
7	NURSING CHARGE	₹ 5,600.00
8	PROFESSIONAL TEAM FEES	₹ 16,000.00
9	RADIOLOGY	₹ 5,325.00
Gross Amount		₹ 85,906.00
Net Payable		₹ 85,906.00
Advance Amount		₹ 55,000.00
Received Amount		₹ 30,906.00

Received Amount in Words : Eighty-Five Thousand Nine Hundred Six Only

SUDHA
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/12/2024	MMH/MH/RECH202403104	CASH	Advance Amount	5,000.00
2	8/16/2024	MMH/MH/RECH202403159	CASH	Advance Amount	50,000.00
3	8/19/2024	MMH/MH/REDH202418089	CASH	Collected Amount	30,906.00