

IN PATIENT SUMMARY BILL

UHID : MMH202480574

IP No : IP2024001823

Patient name : Mr.KANNADASAN GANESAN

Age : 35 Y 0 M 18 D/Male

Bill No : MMH/MH/IP202401754

Bill Date : 16/08/2024

DOA : 15/8/2024 9:03AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.BASHEER AHMED ORTHO

| S.No | Description | Amount |
|------|-----------------------------|-------------|
| 1 | ADMINISTRATION CHARGES | ₹ 350.00 |
| 2 | BED CHARGES | ₹ 4,125.00 |
| 3 | DUTY MEDICAL OFFICER CHARGE | ₹ 1,125.00 |
| 4 | EQUIPMENT | ₹ 7,500.00 |
| 5 | INJECTION CHARGES | ₹ 200.00 |
| 6 | LABORATORY | ₹ 132.00 |
| 7 | NURSING CHARGE | ₹ 1,200.00 |
| 8 | OPERATION THEATRE CHARGES | ₹ 10,500.00 |
| 9 | PHYSIOTHERAPY | ₹ 600.00 |
| 10 | PROFESSIONAL TEAM FEES | ₹ 30,000.00 |

Gross Amount₹ 55,732.00

Net Payable₹ 55,732.00

Advance Amount₹ 5,000.00

Received Amount₹ 50,732.00

Received Amount in Words : Fifty-Five Thousand Seven Hundred Thirty-Two Only

SUDHA

Authorised Signature

Payment History

| S.No | Receipt Date | Receipt Code | Payment Mode | Trans. Type | Received Amount |
|------|--------------|----------------------|--------------|------------------|-----------------|
| 1 | 8/15/2024 | MMH/MH/RECH202403142 | UPI | Advance Amount | 5,000.00 |
| 2 | 8/16/2024 | MMH/MH/REDH202417929 | UPI | Collected Amount | 50,732.00 |