## IN PATIENT SUMMARY BILL

UHID : MHP202401082 Bill No : MMH/MH/IP202402046

IP No : IP2024002025 Bill Date : 23/09/2024

Patient name : Mr.MURUGESAN S DOA : 11/9/2024 7:52PM

Age : 61 Y 8 M 22 D/Male DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.SHIVA KUMAR D

Amount			Description	S.No
350.00	₹		ADMINISTRATION CHARGES	1
19,250.00	₹	BED CHARGES BLOOD COMPONENTS DIET CHARGES DUTY MEDICAL OFFICER CHARGE EQUIPMENT INJECTION CHARGES LABORATORY NURSING CHARGE		
1,000.00	₹			
2,500.00	₹			
3,750.00	₹			
31,000.00	₹			
880.00	₹			
7,067.00	₹			
4,000.00	₹			
47,550.00	₹	OPERATION THEATRE CHARGES		10
39,156.00	₹		PHARMACY CHARGE	11
1,800.00	₹		PHYSIOTHERAPY	12
1,500.00	₹		PROCEDURE CHARGES	13
1,120.00	₹		RADIOLOGY	14
160,923.00	₹	Gross Amount		
160,923.00	₹	Net Payable		
50,000.00	₹	<b>Advance Amount</b>		
0.00	<b>-</b>	<b>D</b>		

Received Amount ₹ 0.00
Amount Payable ₹ 110,923.00

Received Amount in Words : Fifty Thousand Only KARTHICK

**Authorised Signature** 

## **Payment History**

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/12/2024	MMH/MH/RECH202403548	CARD	Advance Amount	50,000.00