

IN PATIENT SUMMARY BILL

UHID : MHI202485430

IP No : IP2024001957

Patient name : Mr.RAMASAMY K

Age : 59 Y 5 M 0 D/Male

Bill No : MMH/MH/IP202401936

Bill Date : 10/09/2024

DOA : 2/9/2024 8:04PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ACCOMMODATION	₹ 23,100.00
2	ADMINISTRATION CHARGES	₹ 350.00
3	BED CHARGES	₹ 52,800.00
4	DIALYSIS / DIALYZER	₹ 9,700.00
5	DIET CHARGES	₹ 4,000.00
6	DUTY MEDICAL OFFICER CHARGE	₹ 2,250.00
7	EQUIPMENT	₹ 35,750.00
8	GENERAL PROCEEDURE	₹ 19,000.00
9	INJECTION CHARGES	₹ 200.00
10	INTENSIVIST CHARGES	₹ 16,500.00
11	LABORATORY	₹ 85,873.00
12	NURSING CHARGE	₹ 13,400.00
13	OPERATION THEATRE CHARGES	₹ 11,000.00
14	PHYSIOTHERAPY	₹ 1,400.00
15	PROFESSIONAL TEAM FEES	₹ 84,000.00
16	RADIOLOGY	₹ 41,650.00
Gross Amount		₹ 400,973.00
Net Payable		₹ 400,973.00
Advance Amount		₹ 384,962.00
Received Amount		₹ 16,011.00

Received Amount in Words : Four Lakh Nine Hundred Seventy-Three Only

SATHISH KUMAR.S  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/10/2024	MMH/MH/REDH202419849	CHEQUE	Collected Amount	16,011.00
2	9/2/2024	MMH/MH/RECH202403397	UPI	Advance Amount	30,000.00
3	9/9/2024	MMH/MH/RECH202403491	UPI	Advance Amount	30,000.00
4	9/10/2024	MMH/MH/RECH202403501	CARD	Advance Amount	124,962.00
5	9/7/2024	MMH/MH/RECH202403476	CASH	Advance Amount	70,000.00
6	9/8/2024	MMH/MH/RECH202403479	CASH	Advance Amount	130,000.00