

IN PATIENT SUMMARY BILL

UHID : MMH202480971

IP No : IP2024001937

Patient name : Mr.KANNAN.M

Age : 52 Y 9 M 27 D/Male

Consultant Name : Dr.SUPRAJA K

Bill No : MMH/MH/IP202401888

Bill Date : 02/09/2024

DOA : 30/8/2024 10:00PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 14,850.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 2,250.00
4	EQUIPMENT	₹ 1,000.00
5	LABORATORY	₹ 29,549.00
6	NURSING CHARGE	₹ 2,400.00
7	PROFESSIONAL TEAM FEES	₹ 15,000.00
8	RADIOLOGY	₹ 6,000.00
Gross Amount		₹ 71,399.00
Net Payable		₹ 71,399.00
Advance Amount		₹ 15,000.00
Received Amount		₹ 56,399.00

Received Amount in Words : Seventy-One Thousand Three Hundred Ninety-Nine Only

SATHISH KUMAR.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/2/2024	MMH/MH/REDH202419203	CHEQUE	Collected Amount	1,306.00
2	8/30/2024	MMH/MH/RECH202403358	UPI	Advance Amount	15,000.00
3	9/2/2024	MMH/MH/REDH202419204	CASH	Collected Amount	55,093.00