

IN PATIENT SUMMARY BILL

UHID : MMH202481221

IP No : IP2024001988

Patient name : Mrs.KALAI ARASI G

Age : 60 Y 0 M 5 D/Female

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401947

Bill Date : 11/09/2024

DOA : 6/9/2024 12:50PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 6,050.00
3	BLOOD COMPONENTS	₹ 5,100.00
4	DIET CHARGES	₹ 500.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 4,125.00
6	GENERAL PROCEEDURE	₹ 950.00
7	INJECTION CHARGES	₹ 200.00
8	LABORATORY	₹ 29,066.00
9	NURSING CHARGE	₹ 4,400.00
10	OPERATION THEATRE CHARGES	₹ 19,199.00
11	PHYSIOTHERAPY	₹ 1,500.00
12	PROFESSIONAL TEAM FEES	₹ 56,500.00
13	RADIOLOGY	₹ 5,060.00
Gross Amount		₹ 133,000.00
Net Payable		₹ 133,000.00
Advance Amount		₹ 60,000.00
Received Amount		₹ 73,000.00

Received Amount in Words : One Lakh Thirty-Three Thousand Only

SUDHA  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/6/2024	MMH/MH/RECH202403450	UPI	Advance Amount	10,000.00
2	9/11/2024	MMH/MH/REDH202419984	UPI	Collected Amount	3,050.00
3	9/7/2024	MMH/MH/RECH202403466	CASH	Advance Amount	50,000.00
4	9/11/2024	MMH/MH/REDH202419985	CASH	Collected Amount	69,950.00