

IN PATIENT SUMMARY BILL

UHID : MMH202481458

IP No : IP2024002040

Patient name : Mrs.THAPITHAL C

Age : 47 Y 4 M 2 D/Female

Consultant Name : Dr.PADMA SRI

Bill No : MMH/MH/IP202401985

Bill Date : 17/09/2024

DOA : 13/9/2024 10:06PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 23,600.00
3	BLOOD COMPONENTS	₹ 10,700.00
4	DIET CHARGES	₹ 1,500.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 750.00
6	EQUIPMENT	₹ 24,600.00
7	INTENSIVIST CHARGES	₹ 9,000.00
8	LABORATORY	₹ 34,593.00
9	NURSING CHARGE	₹ 6,800.00
10	PHYSIOTHERAPY	₹ 1,400.00
11	PROFESSIONAL TEAM FEES	₹ 11,376.00
12	RADIOLOGY	₹ 5,036.00
Gross Amount		₹ 129,705.00
Net Payable		₹ 129,705.00
Advance Amount		₹ 10,000.00
Received Amount		₹ 119,705.00

Received Amount in Words : One Lakh Twenty-Nine Thousand Seven Hundred Five Only

SUDHA  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/13/2024	MMH/MH/RECH202403571	UPI	Advance Amount	10,000.00
2	9/17/2024	MMH/MH/REDH202420427	CARD	Collected Amount	119,705.00