

IN PATIENT SUMMARY BILL

UHID : MMH202481717

IP No : IP2024002136

Patient name : Mrs.KRISHNA GHOSH

Age : 58 Y 0 M 9 D/Female

Consultant Name : Dr.VIJAYAN.J

Bill No : MMH/MH/IP202402114

Bill Date : 01/10/2024

DOA : 24/9/2024 4:32PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 7,700.00
3	BLOOD COMPONENTS	₹ 3,600.00
4	DIET CHARGES	₹ 500.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 5,250.00
6	INJECTION CHARGES	₹ 1,140.00
7	LABORATORY	₹ 2,751.00
8	NURSING CHARGE	₹ 5,600.00
9	OPERATION THEATRE CHARGES	₹ 24,350.00
10	PHARMACY CHARGE	₹ 73,576.00
11	PHYSIOTHERAPY	₹ 500.00
12	PROCEDURE CHARGES	₹ 3,500.00
13	PROFESSIONAL TEAM FEES	₹ 61,183.00
Gross Amount		₹ 190,000.00
Net Payable		₹ 190,000.00
Advance Amount		₹ 173,300.00
Received Amount		₹ 16,700.00

Received Amount in Words : One Lakh Ninety Thousand Only

SUDHA
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/30/2024	MMH/MH/RECH202403848	UPI	Advance Amount	2,000.00
2	10/1/2024	MMH/MH/RECH202403860	UPI	Advance Amount	50,000.00
3	10/1/2024	MMH/MH/RECH202403861	UPI	Advance Amount	26,000.00
4	10/1/2024	MMH/MH/RECH202403862	UPI	Advance Amount	300.00
5	9/26/2024	MMH/MH/RECH202403760	CARD	Advance Amount	50,000.00
6	9/28/2024	MMH/MH/RECH202403796	CARD	Advance Amount	45,000.00
7	10/1/2024	MMH/MH/REDH202421580	CASH	Collected Amount	16,700.00