IN PATIENT SUMMARY BILL

UHID : MMH202481731 Bill No : MMH/MH/IP202402073

: IP2024002128 : 27/09/2024 IP No Bill Date

Patient name : Mr.KARTICK CHANDRA DUTTA : 23/9/2024 3:25PM DOA

DOD : 67 Y 8 M 26 D/Male Age

: CASH Entity Type

: CASH Entity Name

Consultant Name : Dr.SUBRAMANIYAM

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	4,400.00
3	DIET CHARGES		₹	1,000.00
4	DUTY MEDICAL OFFICER CHARGE		₹	3,000.00
5	EQUIPMENT		₹	2,000.00
6	INJECTION CHARGES		₹	200.00
7	LABORATORY		₹	5,682.00
8	NURSING CHARGE		₹	3,200.00
9	OPERATION THEATRE CHARGES		₹	4,750.00
10	PHARMACY CHARGE		₹	35,855.00
11	PROCEDURE CHARGES		₹	1,000.00
12	PROFESSIONAL TEAM FEES		₹	23,563.00
		Gross Amount	₹	85,000.00
		Net Payable	₹	85,000.00

Advance Amount ₹ 83,437.00 **Received Amount** ₹ 1,563.00

Received Amount in Words : Eighty-Five Thousand Only KARTHICK

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/27/2024	MMH/MH/RECH202403777	UPI	Advance Amount	33,437.00
2	9/26/2024	MMH/MH/RECH202403771	CARD	Advance Amount	50,000.00
3	9/27/2024	MMH/MH/REDH202421248	CASH	Collected Amount	1,563.00