IN PATIENT SUMMARY BILL

UHID : MMH/MH/IP202402154 : MMH202482245 Bill No

: IP2024002192 : 07/10/2024 IP No Bill Date

Patient name : Mr.SETHURAMAN L : 1/10/2024 10:26PM DOA

DOD : 74 Y 4 M 5 D/Male Age

· CASH Entity Type

: CASH Entity Name

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	30,000.00
3	DIET CHARGES		₹	2,500.00
4	EQUIPMENT		₹	66,600.00
5	INJECTION CHARGES		₹	5,000.00
6	INTENSIVIST CHARGES		₹	12,000.00
7	LABORATORY		₹	107,228.00
8	NURSING CHARGE		₹	8,000.00
9	PHYSIOTHERAPY		₹	2,400.00
10	PROCEDURE CHARGES		₹	1,000.00
11	RADIOLOGY		₹	37,925.00
12	TRANSPORT		₹	4,000.00
		Gross Amount	₹	277,003.00
		Discount Amount	₹	122,003.00
		Net Payable	₹	155,000.00
		Advance Amount	₹	155,000.00
		Received Amount	₹	0.00

Remarks: As per Dr Palaniappan sir instruction no doctor fees.

SUDHA **Received Amount in Words** : One Lakh Fifty-Five Thousand Only

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/5/2024	MMH/MH/RECH202403911	UPI	Advance Amount	55,000.00
2	10/3/2024	MMH/MH/RECH202403878	CARD	Advance Amount	100,000.00