IN PATIENT SUMMARY BILL

UHID : MMH202482250 Bill No : MMH/MH/IP202402163

IP No : IP2024002194 Bill Date : 08/10/2024

Patient name : Mr.MUTHAL DOA : 2/10/2024 5:05AM

Age : 74 Y 9 M 7 D/Male DOD

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.G. GNANAVELU

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	35,875.00
3	DIET CHARGES		₹	1,000.00
4	DUTY MEDICAL OFFICER CHARGE		₹	2,625.00
5	EQUIPMENT		₹	27,100.00
6	INJECTION CHARGES		₹	200.00
7	INTENSIVIST CHARGES		₹	10,500.00
8	LABORATORY		₹	20,452.00
9	NURSING CHARGE		₹	9,800.00
10	OPERATION THEATRE CHARGES		₹	22,552.00
11	PHYSIOTHERAPY		₹	3,500.00
12	PROCEDURE CHARGES		₹	3,400.00
13	PROFESSIONAL TEAM FEES		₹	59,000.00
14	RADIOLOGY		₹	5,425.00
		Gross Amount	₹	201,779.00
		Net Payable	₹	201,779.00

 Gross Amount
 ₹
 201,779.00

 Net Payable
 ₹
 201,779.00

 Advance Amount
 ₹
 160,000.00

 Received Amount
 ₹
 41,779.00

Received Amount in Words : Two Lakh One Thousand Seven Hundred Seventy-Nine SUDHA

Only Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/2/2024	MMH/MH/RECH202403870	UPI	Advance Amount	50,000.00
2	10/5/2024	MMH/MH/RECH202403915	UPI	Advance Amount	2,000.00
3	10/8/2024	MMH/MH/RECH202403955	UPI	Advance Amount	50,000.00
4	10/8/2024	MMH/MH/REDH202422175	UPI	Collected Amount	41,779.00
5	10/2/2024	MMH/MH/RECH202403868	CASH	Advance Amount	20,000.00
6	10/5/2024	MMH/MH/RECH202403916	CASH	Advance Amount	38,000.00