

IN PATIENT SUMMARY BILL

UHID : MMH202482388

IP No : IP2024002230

Patient name : Mrs.RASOOLAMMA V

Age : 64 Y 0 M 4 D/Female

Consultant Name : Dr.UMA

Bill No : MMH/MH/IP202402190

Bill Date : 11/10/2024

DOA : 7/10/2024 6:08PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 19,800.00
3	BLOOD COMPONENTS	₹ 2,550.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,000.00
5	EQUIPMENT	₹ 7,000.00
6	INJECTION CHARGES	₹ 200.00
7	LABORATORY	₹ 16,296.00
8	NURSING CHARGE	₹ 3,200.00
9	OPERATION THEATRE CHARGES	₹ 7,500.00
10	PROCEDURE CHARGES	₹ 1,000.00
11	PROFESSIONAL TEAM FEES	₹ 66,000.00
Gross Amount		₹ 126,896.00
Net Payable		₹ 126,896.00
Advance Amount		₹ 70,000.00
Received Amount		₹ 56,896.00

Received Amount in Words : One Lakh Twenty-Six Thousand Eight Hundred Ninety-Six Only

SUDHA
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/7/2024	MMH/MH/RECH202403942	CASH	Advance Amount	20,000.00
2	10/8/2024	MMH/MH/RECH202403953	CASH	Advance Amount	50,000.00
3	10/11/2024	MMH/MH/REDH202422383	CASH	Collected Amount	56,896.00