

IN PATIENT SUMMARY BILL

UHID : MMH202482410

IP No : IP2024002247

Patient name : Mr.ROSARIO FERNANDO

Age : 78 Y 0 M 2 D/Male

Consultant Name : Dr.ARUN KUMAR.I

Bill No : MMH/MH/IP202402194

Bill Date : 12/10/2024

DOA : 9/10/2024 11:16AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 3,300.00
3	DIET CHARGES	₹ 1,500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 2,250.00
5	LABORATORY	₹ 4,379.00
6	NURSING CHARGE	₹ 2,400.00
7	OPERATION THEATRE CHARGES	₹ 8,500.00
8	PHYSIOTHERAPY	₹ 2,500.00
9	PROFESSIONAL TEAM FEES	₹ 24,000.00
Gross Amount		₹ 49,179.00
Net Payable		₹ 49,179.00
Advance Amount		₹ 25,000.00
Received Amount		₹ 24,179.00

Received Amount in Words : Forty-Nine Thousand One Hundred Seventy-Nine Only

SUDHA
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/9/2024	MMH/MH/RECH202403965	CARD	Advance Amount	5,000.00
2	10/11/2024	MMH/MH/RECH202404004	CARD	Advance Amount	20,000.00
3	10/12/2024	MMH/MH/REDH202422439	CARD	Collected Amount	24,179.00