

IN PATIENT SUMMARY BILL

UHID : MMH202482475

IP No : IP2024002266

Patient name : Mr.SRIVASANTH R

Age : 38 Y 4 M 23 D/Male

Consultant Name : Dr.YUVARAJ K

Bill No : MMH/MH/IP202402199

Bill Date : 13/10/2024

DOA : 11/10/2024 10:42PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 6,300.00
3	DIET CHARGES	₹ 1,000.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 1,125.00
5	EQUIPMENT	₹ 27,000.00
6	INJECTION CHARGES	₹ 200.00
7	LABORATORY	₹ 6,096.00
8	NURSING CHARGE	₹ 1,200.00
9	OPERATION THEATRE CHARGES	₹ 11,200.00
10	PHARMACY CHARGE	₹ 11,333.00
11	PROCEDURE CHARGES	₹ 500.00
12	PROFESSIONAL TEAM FEES	₹ 30,000.00
13	RADIOLOGY	₹ 1,000.00
Gross Amount		₹ 97,304.00
Net Payable		₹ 97,304.00
Received Amount		₹ 97,304.00

Received Amount in Words : Ninety-Seven Thousand Three Hundred Four Only

SUDHA
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/13/2024	MMH/MH/REDH202422483	CARD	Collected Amount	97,304.00