

IN PATIENT SUMMARY BILL

UHID : MMH202482583

IP No : IP2024002281

Patient name : Mr.BHARATH ARUN M

Age : 37 Y 0 M 1 D/Male

Consultant Name : Dr.VIJAY ALAGAPPAN S

Bill No : MMH/MH/IP202402222

Bill Date : 15/10/2024

DOA : 14/10/2024 1:28PM

DOD :

Entity Type : CASH

Entity Name : CASH

| S.No | Description | Amount |
|-----------------|-----------------------------|-------------|
| 1 | ADMINISTRATION CHARGES | ₹ 350.00 |
| 2 | BED CHARGES | ₹ 1,100.00 |
| 3 | DUTY MEDICAL OFFICER CHARGE | ₹ 750.00 |
| 4 | LABORATORY | ₹ 6,406.00 |
| 5 | NURSING CHARGE | ₹ 800.00 |
| 6 | PROFESSIONAL TEAM FEES | ₹ 3,500.00 |
| 7 | RADIOLOGY | ₹ 525.00 |
| Gross Amount | | ₹ 13,431.00 |
| Net Payable | | ₹ 13,431.00 |
| Advance Amount | | ₹ 5,000.00 |
| Received Amount | | ₹ 8,431.00 |

Received Amount in Words : Thirteen Thousand Four Hundred Thirty-One Only

SUDHA
Authorised Signature

Payment History

| S.No | Receipt Date | Receipt Code | Payment Mode | Trans. Type | Received Amount |
|------|--------------|----------------------|--------------|------------------|-----------------|
| 1 | 10/14/2024 | MMH/MH/RECH202404027 | CASH | Advance Amount | 5,000.00 |
| 2 | 10/15/2024 | MMH/MH/REDH202422654 | CASH | Collected Amount | 8,431.00 |