

IN PATIENT SUMMARY BILL

UHID : MMH202482618

IP No : IP2024002292

Patient name : Mrs.SAKILA KHATOON

Age : 48 Y 3 M 10 D/Female

Consultant Name : Dr.M.VIGNESH

Bill No : MMH/MH/IP202402232

Bill Date : 17/10/2024

DOA : 16/10/2024 8:18AM

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	EQUIPMENT	₹ 17,500.00
5	INJECTION CHARGES	₹ 200.00
6	LABORATORY	₹ 2,331.00
7	NURSING CHARGE	₹ 800.00
8	OPERATION THEATRE CHARGES	₹ 9,500.00
9	PHARMACY CHARGE	₹ 11,841.00
10	PROFESSIONAL TEAM FEES	₹ 27,828.00
11	RADIOLOGY	₹ 2,800.00
Gross Amount		₹ 75,000.00
Net Payable		₹ 75,000.00
Received Amount		₹ 75,000.00

Received Amount in Words : Seventy-Five Thousand Only

SATHISH KUMAR.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/17/2024	MMH/MH/REDH202422742	UPI	Collected Amount	50,000.00
2	10/17/2024	MMH/MH/REDH202422743	CARD	Collected Amount	1,000.00
3	10/17/2024	MMH/MH/REDH202422744	CASH	Collected Amount	24,000.00