

IN PATIENT SUMMARY BILL

UHID : MH24805 Bill No : MMH/MH/IP202401414
 IP No : IP2024001339 Bill Date : 30/06/2024
 Patient name : Mr.JAGATHPATHI P DOA : 15/6/2024 5:50PM
 Age : 84 Y 7 M 1 D/Male DOD : 16/6/2024 11:57PM
 Entity Type : CASH
 Entity Name : CASH
 Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 8,700.00
3	BLOOD COMPONENTS	₹ 4,200.00
4	DIET CHARGES	₹ 1,000.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 750.00
6	EQUIPMENT	₹ 13,000.00
7	GENERAL PROCEDURE	₹ 13,409.00
8	INJECTION CHARGES	₹ 2,200.00
9	INTENSIVIST CHARGES	₹ 1,500.00
10	LABORATORY	₹ 43,742.00
11	NURSING CHARGE	₹ 1,800.00
12	PHARMACY CHARGE	₹ 70,441.00
13	PROFESSIONAL TEAM FEES	₹ 8,000.00
14	RADIOLOGY	₹ 26,408.00
15	TRANSPORT	₹ 1,500.00
		₹ 197,000.00
		₹ 30,000.00
		₹ 167,000.00
		₹ 167,000.00

Received Amount in Words : One Lakh Sixty-Seven Thousand Only

SRINIVASAN
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/20/2024	MMH/MH/REDH202415803	CASH	Collected Amount	167,000.00