

IN PATIENT SUMMARY BILL

UHID : MHC202470531

IP No : IPC2024002125

Patient name : Dr.MURUGESAN

Age : 68 Y 0 M 3 D/Male

Bill No : MMH/CM/IP202402113

Bill Date : 06/08/2024

DOA : 3/8/2024 3:08PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.ARTHI

S.No	Description	Amount
1	BED CHARGES	₹ 10,250.00
2	DIET CHARGES	₹ 300.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 500.00
4	EQUIPMENT	₹ 3,700.00
5	INFECTION CONTROL	₹ 100.00
6	INTENSIVIST CHARGES	₹ 1,500.00
7	IP REGISTRATION	₹ 211.00
8	LABORATORY	₹ 8,554.00
9	MEDICAL RECORD CHARGE	₹ 200.00
10	NURSING CHARGE	₹ 625.00
11	RADIOLOGY	₹ 5,460.00
12	TRANSPORT	₹ 600.00
Gross Amount		₹ 32,000.00
Discount Amount		₹ 3,000.00
Net Payable		₹ 29,000.00
Received Amount		₹ 29,000.00

Received Amount in Words : Twenty-Nine Thousand Only

IMANUVEL
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/6/2024	MMH/CM/RECBBD202436461	CARD	Collected Amount	29,000.00