

IN PATIENT SUMMARY BILL

UHID : MHV202404186

IP No : IPV2024000729

Patient name : B/O.VIDHIYA

Age : 0 Y 0 M 2 D/Male

Consultant Name : Dr.(MAJOR) SATHISH KUMAR

Bill No : MMH/VM/IPV202400728

Bill Date : 23/08/2024

DOA : 21/8/2024 9:00PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 250.00
2	BED CHARGES	₹ 3,500.00
3	CASUALTY	₹ 750.00
4	EQUIPMENT	₹ 5,100.00
5	INJECTION CHARGES	₹ 350.00
6	INTENSIVIST CHARGES	₹ 1,500.00
7	LABORATORY	₹ 4,188.00
8	NURSING CHARGE	₹ 500.00
9	PROFESSIONAL TEAM FEES	₹ 1,850.00
10	RADIOLOGY	₹ 2,160.00
Gross Amount		₹ 20,148.00
Discount Amount		₹ 10,098.00
Net Payable		₹ 10,050.00
Advance Amount		₹ 10,050.00
Received Amount		₹ 0.00

Received Amount in Words : Ten Thousand Fifty Only

GANESH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/21/2024	MMH/VM/RECAP202400910	UPI	Advance Amount	10,050.00