IN PATIENT DETAILED BILL

Patient Name	: **Ms.M KRISHNA VENI**		Patient Id	:	**MHK202300579**
Patient Type	: IP		Bill No	:	MMH/KM/IPK00046
Gender	: Female		IP No	:	IPK00045
Age	: 26 Y 0 M 5 D		Ward/Bed	:	SINGLE ROOM NON AC / 10
Doctor Name	: Dr.KRISHNA PRITHVI		DOA	:	24/12/2023 1:14PM
Speciality	: PULMONOLOGIST		DOD	:	
Entity Type	: CASH		Bill Date	:	29/12/2023
Payer	: CASH				

S.No	Date & Time	Particulars	QTY		Unit Rate		Amount
ADMINISTRATION CHARGES							
1	29/12/2023	REGISTRATION CHARGES	1.00	₹	50.00	₹	50.00
BED CHARGES							
2	29/12/2023	BED CHARGES - SINGLE ROOM	5.00 days	₹	3,000.00	₹	15,000.00
BLOOD COMPONENTS							
3	24/12/2023	BLOOD TRANSFUSION	1.00	₹	1,500.00	₹	1,500.00
4	28/12/2023	BLOOD TRANSFUSION	1.00	₹	1,500.00	₹	1,500.00
5	25/12/2023	BLOOD TRANSFUSION	1.00	₹	1,500.00	₹	1,500.00
CASUALTY							
6	29/12/2023	CONSULTATION	5.00	₹	1,000.00	₹	5,000.00
7	29/12/2023	CONSULTATION	1.00	₹	1,000.00	₹	1,000.00
EQUIPMENT							
8	29/12/2023	NEBULIZER CHARGE	5.00	₹	150.00	₹	750.00
9	29/12/2023	MONITOR CHARGE ½ DAY	1.00	₹	700.00	₹	700.00
LABORATORY							
10	26/12/2023	FOLIC ACID	1.00	₹	1,584.00	₹	1,584.00
11	26/12/2023	VITAMIN B 12	1.00	₹	1,440.00	₹	1,440.00
12	26/12/2023	STOOL - OCCULT BLOOD	1.00	₹	288.00	₹	288.00
13	25/12/2023	RETICULOCYTE COUNT	1.00	₹	432.00	₹	432.00
14	24/12/2023	BLOOD GROUP and RH TYPE	1.00	₹	216.00	₹	216.00
15	26/12/2023	HAEMOGLOBIN	1.00	₹	60.00	₹	60.00
16	29/12/2023	HAEMOGLOBIN	1.00	₹	60.00	₹	60.00
17	25/12/2023	COOMBS TEST - INDIRECT	1.00	₹	576.00	₹	576.00
18	26/12/2023	FERRITIN	1.00	₹	1,200.00	₹	1,200.00
19	25/12/2023	COOMBS TEST - DIRECT	1.00	₹	720.00	₹	720.00

Gross Amount	₹	**33,576.00**
Net Payable	₹	**33,576.00**
Advance Amount	₹	**33,576.00**
Received Amount	₹	**0.00**

Received Amount In Words : Thirty-Three Thousand Five Hundred Seventy-Six Only

RAYAPUREDDI VINODKUMAR
Authorized Signtaure

S.No	Date & Time	Particulars	QTY	Unit Rate	Amount

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	24/12/2023	MMH/KM/RECAP00093	CASH	Advance Amount	5,000.00
2	25/12/2023	MMH/KM/RECAP00095	CASH	Advance Amount	1,728.00
3	26/12/2023	MMH/KM/RECAP00101	CASH	Advance Amount	4,500.00
4	26/12/2023	MMH/KM/RECAP00102	CASH	Advance Amount	4,500.00
5	28/12/2023	MMH/KM/RECAP00110	CASH	Advance Amount	4,500.00
6	29/12/2023	MMH/KM/RECAP00117	UPI	Advance Amount	348.00
7	29/12/2023	MMH/KM/RECAP00118	CASH	Advance Amount	13,000.00