IN PATIENT DETAILED BILL

Patient Name	:	**Baby.SHANVIKA SRI.V**	Patient Id	:	**MKB202400022**
Patient Type	:	IP	Bill No	:	MMH/MK/IP202400017
Gender	:	Female	IP No	:	IPKB2024000005
Age	:	0 Y 0 M 6 D	Ward/Bed	:	SINGLE ROOM A/C / 207
Doctor Name	:	Dr.S.MAHESHWARAN	DOA	:	01/01/2024 8:42PM
Speciality	:	NEONATOLOGIST	DOD	:	
Entity Type	:	CASH	Bill Date	:	07/01/2024
Payer	:	CASH			

S.No	Date & Time	Particulars	QTY	Unit Rate	Amount
ADMINISTRATION CHARGES					
1	01/02/2024	ADMISSION CHARGES MWC	1.00	₹ 150.00	₹ 150.00
BED CHARGES					
2	01/07/2024	BED CHARGES - SINGLE ROOM	6.00 days	₹ 2,000.00	₹ 12,000.00
EQUIPMENT					
3	01/07/2024	NEBULIZER CHARGE	6.00	₹ 100.00	₹ 600.00
4	01/04/2024	NEBULIZER CHARGE	6.00	₹ 100.00	₹ 600.00
5	01/06/2024	NEBULIZER CHARGE	5.00	₹ 100.00	₹ 500.00
6	01/05/2024	NEBULIZER CHARGE	2.00	₹ 100.00	₹ 200.00
7	01/02/2024	NEBULIZER CHARGE	3.00	₹ 100.00	₹ 300.00
LABORATORY					
8	01/01/2024	CREATININE	1.00	₹ 120.00	₹ 120.00
9	01/01/2024	UREA	1.00	₹ 120.00	₹ 120.00
10	01/05/2024	CBC	1.00	₹ 504.00	₹ 504.00
11	01/05/2024	C.R.P. (C-Reactive Protein)	1.00	₹ 720.00	₹ 720.00
MEDICAL RECORD CHARGE					
12	01/02/2024	MEDICAL RECORD CHARGE	1.00	₹ 200.00	₹ 200.00
NURSING CHARGE					
13	01/02/2024	STERLIZATION AND DISINFECTION CHARGES	1.00	₹ 200.00	₹ 200.00
14	01/07/2024	STERLIZATION AND DISINFECTION CHARGES	1.00	₹ 200.00	₹ 200.00
15	01/06/2024	NURSING CHARGES	1.00	₹ 250.00	₹ 250.00
16	01/05/2024	STERLIZATION AND DISINFECTION CHARGES	1.00	₹ 200.00	₹ 200.00
17	01/04/2024	STERLIZATION AND DISINFECTION CHARGES	1.00	₹ 200.00	₹ 200.00
18	01/03/2024	STERLIZATION AND DISINFECTION CHARGES	1.00	₹ 200.00	₹ 200.00
19	01/03/2024	NURSING CHARGES	1.00	₹ 250.00	₹ 250.00
20	01/07/2024	NURSING CHARGES	1.00	₹ 250.00	₹ 250.00
21	01/06/2024	STERLIZATION AND DISINFECTION CHARGES	1.00	₹ 200.00	₹ 200.00
22	01/02/2024	NURSING CHARGES	1.00	₹ 250.00	₹ 250.00
23	01/05/2024	NURSING CHARGES	1.00	₹ 250.00	₹ 250.00

S.No	Date & Time	Particulars	QTY		Unit Rate		Amount
24	01/04/2024	NURSING CHARGES	1.00	₹	250.00	₹	250.00
PROFESSIONAL TEAM FEES							
25	01/07/2024	PROFESSIONAL FEES(Dr.S.MAHESHWARAN)	1.00	₹	10,500.00	₹	10,500.00

Gross Amount	₹	**29,214.00**
Net Payable	₹	**29,214.00**
Advance Amount	₹	**10,000.00**
Received Amount	₹	**19,214.00**

Received Amount In Words : Twenty-Nine Thousand Two Hundred Fourteen Only

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Authorized Signtaure

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	03/01/2024	MMH/MK/RECH20240001	CASH	Advance Amount	5,000.00
2	05/01/2024	MMH/MK/RECH20240003	CASH	Advance Amount	5,000.00
3	07/01/2024	MMH/MK/REDH20240018	UPI	Collected Amount	19,214.00