IN PATIENT DETAILED BILL (DUPLICATE - COPY)

Patient Name	:	**Mr.KUDBUDEEN.P**	Patient Id	:	**MKB202400094**
Patient Type	:	IP	Bill No	:	MMH/MK/IP202400013
Gender	:	Male	IP No	:	IPKB2024000018
Age	:	47 Y 0 M 3 D	Ward/Bed	:	GENERAL WARD / GW - 5
Doctor Name	:	Dr.K.NAYAS AHAMAED	DOA	:	03/01/2024 2:40PM
Speciality	:	VASCULAR SUREON	DOD	:	
Entity Type	:	CASH	Bill Date		06/01/2024
Payer	:	CASH		:	

S.No	Date & Time	Particulars	QTY	Unit Rate	Amount
ADMINISTRATION CHARGES					
OTHERS					
1	01/04/2024	ADMISSION CHARGES MWC	1.00	₹ 150.00	₹ 150.00
				Sub Total:	**₹150.00**
BED CHARGES					
BED CHARGES					
2	01/06/2024	BED CHARGES - GENERAL WARD	3.00 days	₹ 1,000.00	₹ 3,000.00
				Sub Total:	**₹3,000.00**
DUTY MEDICAL OFFICER CHARGE					
DUTY MEDICAL OFFICER CHARGE					
3	01/05/2024	DMO	1.00	₹ 400.00	₹ 400.00
4	01/06/2024	DMO	1.00	₹ 400.00	₹ 400.00
5	01/04/2024	DMO	1.00	₹ 400.00	₹ 400.00
				Sub Total:	**₹1,200.00**
EQUIPMENT					
MEDICAL EQUIPMENT					
6	01/04/2024	OXYGEN PER HOUR	1.00	₹ 350.00	₹ 350.00
				Sub Total:	**₹350.00**
GENERAL PROCEDURE					
GENERAL PROCEDURE					
7	01/05/2024	DRESSING CHARGES	1.00	₹ 300.00	₹ 300.00
8	01/06/2024	DRESSING CHARGES	1.00	₹ 300.00	₹ 300.00
				Sub Total:	**₹600.00**
LABORATORY					
BIOCHEMISTRY					
9	01/05/2024	CBG. (Capillary Blood Glucose)	1.00	₹ 100.00	₹ 100.00
10	01/05/2024	CBG. (Capillary Blood Glucose)	1.00	₹ 100.00	₹ 100.00
11	01/04/2024	CBG. (Capillary Blood Glucose)	1.00	₹ 100.00	₹ 100.00
12	01/03/2024	GLUCOSE (RANDOM)	1.00	₹ 50.00	₹ 50.00
13	01/04/2024	CBG. (Capillary Blood Glucose)	1.00	₹ 100.00	₹ 100.00
14	01/04/2024	CBG. (Capillary Blood Glucose)	1.00	₹ 100.00	₹ 100.00

S.No	Date & Time	Particulars	QTY		Unit Rate		Amount
15	01/03/2024	CBG. (Capillary Blood Glucose)	3.00	₹	100.00	₹	300.00
16	01/06/2024	GLUCOSE (FASTING)	1.00	₹	50.00	₹	50.00
17	01/06/2024	CBG. (Capillary Blood Glucose)	2.00	₹	100.00	₹	200.00
18	01/03/2024	ACETONE (BLOOD)	1.00	₹	840.00	₹	840.00
					Sub Total:		**₹1,940.00**
MEDICAL RECORD CHARGE							
MEDICAL RECORD CHARGE							
19	01/04/2024	MEDICAL RECORD CHARGE	1.00	₹	200.00	₹	200.00
					Sub Total:		**₹200.00**
NURSING CHARGE							
NURSING CHARGE							
20	01/06/2024	NURSING CHARGES	1.00	₹	250.00	₹	250.00
21	01/05/2024	STERLIZATION AND DISINFECTION CHARGES	1.00	₹	200.00	₹	200.00
22	01/04/2024	NURSING CHARGES	1.00	₹	250.00	₹	250.00
23	01/05/2024	NURSING CHARGES	1.00	₹	250.00	₹	250.00
24	01/06/2024	STERLIZATION AND DISINFECTION CHARGES	1.00	₹	200.00	₹	200.00
25	01/04/2024	STERLIZATION AND DISINFECTION CHARGES	1.00	₹	200.00	₹	200.00
					Sub Total:		**₹1,350.00**
OPERATION THEATRE CHARGES							
THEATRE CHARGES							
26	01/04/2024	OT CHARGES	1.00	₹	5,000.00	₹	5,000.00
27	01/04/2024	DIATHERMY CHARGES	1.00	₹	150.00	₹	150.00
					Sub Total:		**₹5,150.00**
PROFESSIONAL TEAM FEES							
PROFESSIONAL TEAM FEES							
28	01/06/2024	PROFESSIONAL FEES(Dr.K.NAYAS AHAMAED)	1.00	₹	3,060.00	₹	3,060.00
29	01/06/2024	PROFESSIONAL FEES(Dr.S.JAMUNA)	1.00	₹	3,000.00	₹	3,000.00
					Sub Total:		**₹6,060.00**

Gross Amount	₹	**20,000.00**
Net Payable	₹	**20,000.00**
Advance Amount	₹	**20,000.00**
Received Amount	₹	**0.00**

Received Amount In Words : Twenty Thousand Only

DHIVYA.P

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	2024-01-03 16:14:13.5300000	MMH/MK/RECH20240001	CASH	Advance Amount	20,000.00