

## IN PATIENT SUMMARY BILL

UHID : MKB202403242 Bill No : MMH/MK/IP202400745  
IP No : IPKB2024000751 Bill Date : 03/06/2024  
Patient name : Master.THIRUMURUGAN.R DOA : 31/5/2024 9:00PM  
Age : 13 Y 0 M 14 D/Male DOD : 3/6/2024 1:53PM  
Entity Type : CASH Entity Name : CASH  
Consultant Name : Dr.J.ALEX MOSES

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 150.00
2	BED CHARGES	₹ 3,000.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,200.00
4	EQUIPMENT	₹ 350.00
5	IMPLANT	₹ 5,000.00
6	INJECTION CHARGES	₹ 350.00
7	LABORATORY	₹ 100.00
8	MEDICAL RECORD CHARGE	₹ 200.00
9	NURSING CHARGE	₹ 1,350.00
10	OPERATION THEATRE CHARGES	₹ 7,600.00
11	PROFESSIONAL TEAM FEES	₹ 40,000.00
12	RADIOLOGY	₹ 700.00

Gross Amount ₹ 60,000.00  
Discount Amount ₹ 3,000.00  
Net Payable ₹ 57,000.00  
Advance Amount ₹ 57,000.00  
Received Amount ₹ 0.00

Received Amount in Words : Fifty-Seven Thousand Only

KRISHNAN  
Authorised Signature

### Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/1/2024	MMH/MK/RECH202401739	CASH	Advance Amount	20,000.00
2	6/3/2024	MMH/MK/RECH202401768	CASH	Advance Amount	37,000.00