

IN PATIENT SUMMARY BILL

UHID : MKB202403455

IP No : IPKB2024000808

Patient name : Mr.IYAPPAN.G

Age : 25 Y 0 M 12 D/Male

Consultant Name : Dr.S.JAMUNA

Bill No : MMH/MK/IP202400823

Bill Date : 24/06/2024

DOA : 12/6/2024 12:40PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ACCIDENT / TRAUMA (MLC) REGISTRATION	₹ 1,500.00
2	ADMINISTRATION CHARGES	₹ 150.00
3	BED CHARGES	₹ 26,450.00
4	BLOOD COMPONENTS	₹ 750.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 4,800.00
6	EQUIPMENT	₹ 23,850.00
7	GENERAL PROCEDURE	₹ 3,200.00
8	IMPLANT	₹ 62,077.00
9	INJECTION CHARGES	₹ 3,020.00
10	INTENSIVIST CHARGES	₹ 15,000.00
11	LABORATORY	₹ 16,488.00
12	MEDICAL RECORD CHARGE	₹ 200.00
13	NURSING CHARGE	₹ 6,350.00
14	OPERATION THEATRE CHARGES	₹ 30,850.00
15	OTHERS	₹ 2,000.00
16	PHARMACY CHARGE	₹ 200.00
17	PHYSIOTHERAPY	₹ 1,600.00
18	PROFESSIONAL TEAM FEES	₹ 195,500.00
19	RADIOLOGY	₹ 26,790.00
Gross Amount		₹ 420,775.00
Discount Amount		₹ 20,000.00
Net Payable		₹ 400,775.00
Advance Amount		₹ 313,500.00
Received Amount		₹ 87,275.00

Received Amount in Words : Four Lakh Seven Hundred Seventy-Five Only

MANIMEGALAI.T
Authorised Signature

S.No	Description	Amount
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Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/12/2024	MMH/MK/RECH202401886	UPI	Advance Amount	20,000.00
2	6/12/2024	MMH/MK/RECH202401887	UPI	Advance Amount	6,000.00
3	6/13/2024	MMH/MK/RECH202401893	UPI	Advance Amount	24,000.00
4	6/14/2024	MMH/MK/RECH202401907	UPI	Advance Amount	26,000.00
5	6/15/2024	MMH/MK/RECH202401925	CASH	Advance Amount	100,000.00
6	6/16/2024	MMH/MK/RECH202401933	CASH	Advance Amount	12,000.00
7	6/16/2024	MMH/MK/RECH202401934	UPI	Advance Amount	24,000.00
8	6/17/2024	MMH/MK/RECH202401943	CASH	Advance Amount	500.00
9	6/17/2024	MMH/MK/RECH202401944	UPI	Advance Amount	11,000.00
10	6/19/2024	MMH/MK/RECH202401960	CASH	Advance Amount	50,000.00
11	6/20/2024	MMH/MK/RECH202401968	CASH	Advance Amount	40,000.00
12	6/24/2024	MMH/MK/REDH202405539	CASH	Collected Amount	87,275.00