IN PATIENT SUMMARY BILL

UHID	:	MKB202403813	Bill No	:	MMH/MK/IP202400892
IP No	:	IPKB2024000898	Bill Date	:	12/07/2024
Patient name	:	Mr.SRINIVASAN.T	DOA	:	6/7/2024 12:15AM
Age	:	67 Y 0 M 6 D/Male	DOD	:	
			Entity Type	:	CASH
			Entity Name	:	CASH
Consultant Name	:	Dr.M.BALAPRAKASH			

S.No	Description		Amount
1	ADMINISTRATION CHARGES	₹	150.00
2	BED CHARGES	₹	22,400.00
3	DUTY MEDICAL OFFICER CHARGE	₹	2,800.00
4	EQUIPMENT	₹	45,800.00
5	GENERAL PROCEDURE	₹	200.00
6	INTENSIVIST CHARGES	₹	12,000.00
7	LABORATORY	₹	19,336.00
8	MEDICAL RECORD CHARGE	₹	200.00
9	NURSING CHARGE	₹	3,550.00
10	OTHERS	₹	2,000.00
11	PHYSIOTHERAPY	₹	3,200.00
12	PROFESSIONAL TEAM FEES	₹	15,000.00
13	RADIOLOGY	₹	10,660.00
	Gross Amount	₹	**137,296.00**
	Discount Amount	₹	**3,000.00**
	Net Payable	₹	**134,296.00**
	Advance Amount	₹	**134,296.00**
	Received Amount	₹	**0.00**

Received Amount in Words : One Lakh Thirty-Four Thousand Two Hundred Ninety-Six Only

KRISHNAN
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/6/2024	MMH/MK/RECH202402135	CASH	Advance Amount	10,000.00
2	7/9/2024	MMH/MK/RECH202402151	UPI	Advance Amount	15,000.00
3	7/11/2024	MMH/MK/RECH202402171	UPI	Advance Amount	18,000.00
4	7/8/2024	MMH/MK/RECH202402194	UPI	Advance Amount	20,000.00
5	7/7/2024	MMH/MK/RECH202402195	CASH	Advance Amount	10,000.00
6	7/12/2024	MMH/MK/RECH202402197	UPI	Advance Amount	53,000.00
7	7/12/2024	MMH/MK/RECH202402198	UPI	Advance Amount	8,296.00