

IN PATIENT SUMMARY BILL

UHID : MKB202404046
IP No : IPKB2024000947
Patient name : Mr.SATHIYA RAJ.C
Age : 38 Y 1 M 18 D/Male
Bill No : MMH/MK/IP202400922
Bill Date : 18/07/2024
DOA : 15/7/2024 6:40PM
DOD : 18/7/2024 2:28PM
Entity Type : CASH
Entity Name : CASH
Consultant Name : Dr.KARTHIK RAJ

S.No	Description	Amount
1	ACCIDENT / TRAUMA (MLC) REGISTRATION	₹ 1,500.00
2	ADMINISTRATION CHARGES	₹ 150.00
3	BED CHARGES	₹ 9,700.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 1,600.00
5	EQUIPMENT	₹ 5,050.00
6	GENERAL PROCEDURE	₹ 200.00
7	INTENSIVIST CHARGES	₹ 6,000.00
8	LABORATORY	₹ 12,288.00
9	MEDICAL RECORD CHARGE	₹ 200.00
10	NURSING CHARGE	₹ 2,000.00
11	OTHERS	₹ 2,000.00
12	PROFESSIONAL TEAM FEES	₹ 7,250.00
13	RADIOLOGY	₹ 8,240.00
	Gross Amount	₹ 56,178.00
	Discount Amount	₹ 2,000.00
	Net Payable	₹ 54,178.00
	Advance Amount	₹ 48,000.00
	Received Amount	₹ 6,178.00

Received Amount in Words : Fifty-Four Thousand One Hundred Seventy-Eight Only

MANIMEGALAI.T
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/15/2024	MMH/MK/RECH202402257	UPI	Advance Amount	5,000.00
2	7/16/2024	MMH/MK/RECH202402265	UPI	Advance Amount	30,500.00
3	7/17/2024	MMH/MK/RECH202402281	CASH	Advance Amount	12,500.00
4	7/18/2024	MMH/MK/REDH202406401	CASH	Collected Amount	6,178.00