

IN PATIENT SUMMARY BILL

UHID : MKB202404618

IP No : IPKB2024001071

Patient name : Mr.RAMACHANDRAN.N

Age : 58 Y 0 M 0 D/Male

Consultant Name : Dr.M.BALAPRAKASH

Bill No : MMH/MK/IP202401049

Bill Date : 19/08/2024

DOA : 19/8/2024 6:40AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 150.00
2	BED CHARGES	₹ 4,100.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 400.00
4	EQUIPMENT	₹ 6,000.00
5	GENERAL PROCEEDURE	₹ 5,000.00
6	INTENSIVIST CHARGES	₹ 3,000.00
7	LABORATORY	₹ 4,776.00
8	MEDICAL RECORD CHARGE	₹ 200.00
9	NURSING CHARGE	₹ 550.00
10	OTHERS	₹ 6,000.00
11	PROFESSIONAL TEAM FEES	₹ 5,000.00
12	RADIOLOGY	₹ 2,540.00
Gross Amount		₹ 37,716.00
Discount Amount		₹ 4,716.00
Net Payable		₹ 33,000.00
Received Amount		₹ 33,000.00

Received Amount in Words : Thirty-Three Thousand Only

KRISHNAN  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/19/2024	MMH/MK/REDH202407363	UPI	Collected Amount	33,000.00