

### IN PATIENT SUMMARY BILL

UHID : MKB202404618      Bill No : MMH/MK/IP202401049  
 IP No : IPKB2024001071      Bill Date : 19/08/2024  
 Patient name : Mr.RAMACHANDRAN.N      DOA : 19/8/2024 6:40AM  
 Age : 58 Y 0 M 0 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	₹ 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
		₹ 37,716.00
		₹ 4,716.00
		₹ 33,000.00
		₹ 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