

IN PATIENT SUMMARY BILL

UHID : MKB202404635

IP No : IPKB2024001073

Patient name : Mr.PRAVEEN.S

Age : 18 Y 0 M 4 D/Male

Consultant Name : Dr.KARTHIK RAJ

Bill No : MMH/MK/IP202401059

Bill Date : 23/08/2024

DOA : 19/8/2024 4:30PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 150.00
2	BED CHARGES	₹ 6,000.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,600.00
4	EQUIPMENT	₹ 950.00
5	GENERAL PROCEEDURE	₹ 800.00
6	IMPLANT	₹ 51,415.00
7	INJECTION CHARGES	₹ 350.00
8	LABORATORY	₹ 500.00
9	MEDICAL RECORD CHARGE	₹ 200.00
10	NURSING CHARGE	₹ 1,800.00
11	OPERATION THEATRE CHARGES	₹ 19,550.00
12	OTHERS	₹ 2,000.00
13	PROFESSIONAL TEAM FEES	₹ 81,000.00
Gross Amount		₹ 166,315.00
Discount Amount		₹ 7,315.00
Net Payable		₹ 159,000.00
Advance Amount		₹ 159,000.00
Received Amount		₹ 0.00

Received Amount in Words : One Lakh Fifty-Nine Thousand Only

DHIVYA.P  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/20/2024	MMH/MK/RECH202402643	UPI	Advance Amount	30,000.00
2	8/23/2024	MMH/MK/RECH202402672	UPI	Advance Amount	5,000.00
3	8/21/2024	MMH/MK/RECH202402656	CASH	Advance Amount	100,000.00
4	8/23/2024	MMH/MK/RECH202402673	CASH	Advance Amount	24,000.00