

IN PATIENT SUMMARY BILL

UHID : MKB202404696

IP No : IPKB2024001085

Patient name : Mr.ADAIKALARAJ

Age : 64 Y 0 M 4 D/Male

Bill No : MMH/MK/IP202401078

Bill Date : 28/08/2024

DOA : 24/8/2024 9:20PM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.M.BALAPRAKASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 150.00
2	BED CHARGES	₹ 12,200.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,600.00
4	EQUIPMENT	₹ 5,500.00
5	GENERAL PROCEEDURE	₹ 200.00
6	INTENSIVIST CHARGES	₹ 6,000.00
7	LABORATORY	₹ 9,366.00
8	MEDICAL RECORD CHARGE	₹ 200.00
9	NURSING CHARGE	₹ 2,000.00
10	PROFESSIONAL TEAM FEES	₹ 4,500.00
11	RADIOLOGY	₹ 8,240.00
Gross Amount		₹ 49,956.00
Discount Amount		₹ 2,500.00
Net Payable		₹ 47,456.00
Advance Amount		₹ 25,500.00
Received Amount		₹ 21,956.00

Received Amount in Words : Forty-Seven Thousand Four Hundred Fifty-Six Only

DHIVYA.P
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/24/2024	MMH/MK/RECH202402681	CARD	Advance Amount	7,000.00
2	8/25/2024	MMH/MK/RECH202402684	CARD	Advance Amount	8,500.00
3	8/26/2024	MMH/MK/RECH202402701	CASH	Advance Amount	10,000.00
4	8/28/2024	MMH/MK/REDH202407592	CASH	Collected Amount	21,956.00