

IN PATIENT SUMMARY BILL

UHID : MKB202404861

IP No : IPKB2024001129

Patient name : Mr.ABDUL RAHIM.A

Age : 55 Y 0 M 2 D/Male

Consultant Name : Dr.M.BALAPRAKASH

Bill No : MMH/MK/IP202401116

Bill Date : 06/09/2024

DOA : 4/9/2024 5:00AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 150.00
2	BED CHARGES	₹ 7,100.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,200.00
4	EQUIPMENT	₹ 9,250.00
5	INTENSIVIST CHARGES	₹ 3,000.00
6	LABORATORY	₹ 18,174.00
7	MEDICAL RECORD CHARGE	₹ 200.00
8	NURSING CHARGE	₹ 1,450.00
9	PROFESSIONAL TEAM FEES	₹ 5,250.00
10	RADIOLOGY	₹ 8,090.00
Gross Amount		₹ 53,864.00
Discount Amount		₹ 2,000.00
Net Payable		₹ 51,864.00
Advance Amount		₹ 25,000.00
Received Amount		₹ 26,864.00

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

KRISHNAN
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/5/2024	MMH/MK/RECH202402828	CARD	Advance Amount	25,000.00
2	9/6/2024	MMH/MK/REDH202407876	CARD	Collected Amount	26,864.00