

### IN PATIENT SUMMARY BILL

UHID : MKB202405037  
 IP No : IPKB2024001178  
 Patient name : Mr.SUGENDHRA BABU . S  
 Age : 74 Y 0 M 8 D/Male  
 Consultant Name : Dr.KARTHIK RAJ

Bill No : MMH/MK/IP202401185  
 Bill Date : 21/09/2024  
 DOA : 13/9/2024 3:30PM  
 DOD :  
 Entity Type : CASH  
 Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 150.00
2	BED CHARGES	₹ 23,500.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 3,200.00
4	EQUIPMENT	₹ 26,250.00
5	INJECTION CHARGES	₹ 350.00
6	INTENSIVIST CHARGES	₹ 15,000.00
7	LABORATORY	₹ 8,248.00
8	MEDICAL RECORD CHARGE	₹ 200.00
9	NURSING CHARGE	₹ 4,100.00
10	OTHERS	₹ 2,000.00
11	PROCEDURE CHARGES	₹ 200.00
12	PROFESSIONAL TEAM FEES	₹ 17,750.00
13	RADIOLOGY	₹ 15,540.00
		<b>₹ 116,488.00</b>
		<b>₹ 3,000.00</b>
		<b>₹ 113,488.00</b>
		<b>₹ 103,500.00</b>
		<b>₹ 9,988.00</b>

**Received Amount in Words** : One Lakh Thirteen Thousand Four Hundred Eighty-Eight  
 Only

DHIVYA.P  
**Authorised Signature**

#### Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/21/2024	MMH/MK/REDH202408348	CARD	Collected Amount	9,988.00
2	9/14/2024	MMH/MK/RECH202402942	CARD	Advance Amount	21,000.00
3	9/15/2024	MMH/MK/RECH202402965	CARD	Advance Amount	28,500.00
4	9/16/2024	MMH/MK/RECH202402969	CARD	Advance Amount	19,000.00
5	9/17/2024	MMH/MK/RECH202402983	CARD	Advance Amount	17,500.00
6	9/18/2024	MMH/MK/RECH202403001	CARD	Advance Amount	11,000.00
7	9/19/2024	MMH/MK/RECH202403012	CARD	Advance Amount	3,500.00
8	9/20/2024	MMH/MK/RECH202403027	CARD	Advance Amount	3,000.00