

IN PATIENT SUMMARY BILL

UHID : MKB202405186 Bill No : MMH/MK/IP202401193
IP No : IPKB2024001220 Bill Date : 22/09/2024
Patient name : Mr.RANJITH.R DOA : 21/9/2024 11:00PM
Age : 25 Y 0 M 1 D/Male DOD :
Entity Type : CASH
Entity Name : CASH
Consultant Name : Dr.B.VINOTHKUMAR

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 150.00
2	BED CHARGES	₹ 4,100.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 400.00
4	EQUIPMENT	₹ 1,100.00
5	INTENSIVIST CHARGES	₹ 3,000.00
6	LABORATORY	₹ 2,496.00
7	MEDICAL RECORD CHARGE	₹ 200.00
8	NURSING CHARGE	₹ 550.00
9	OTHERS	₹ 2,000.00
10	PROFESSIONAL TEAM FEES	₹ 3,000.00
11	RADIOLOGY	₹ 3,920.00

Gross Amount ₹ 20,916.00
Discount Amount ₹ 2,500.00
Net Payable ₹ 18,416.00
Received Amount ₹ 18,416.00

Received Amount in Words : Eighteen Thousand Four Hundred Sixteen Only

KRISHNAN
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/22/2024	MMH/MK/REDH202408393	UPI	Collected Amount	18,416.00