IN PATIENT SUMMARY BILL

UHID	:	MKB202405122	Bill No	:	MMH/MK/IP202401212
IP No	:	IPKB2024001201	Bill Date	:	25/09/2024
Patient name	:	Mr.VIJAY.M	DOA	:	17/9/2024 11:05PM
Age	:	30 Y 0 M 8 D/Male	DOD	:	
			Entity Type	:	CASH
			Entity Name	:	CASH
Consultant Name	:	Dr.J.ALEX MOSES			

S.No	Description		Amount
1	ACCIDENT / TRAUMA (MLC) REGISTRATION	₹	1,500.00
2	ADMINISTRATION CHARGES	₹	150.00
3	BED CHARGES	₹	17,200.00
4	BLOOD COMPONENTS	₹	250.00
5	DUTY MEDICAL OFFICER CHARGE	₹	3,200.00
6	EQUIPMENT	₹	9,350.00
7	IMPLANT	₹	30,550.00
8	INJECTION CHARGES	₹	700.00
9	INTENSIVIST CHARGES	₹	6,000.00
10	LABORATORY	₹	5,720.00
11	MEDICAL RECORD CHARGE	₹	200.00
12	NURSING CHARGE	₹	3,800.00
13	OPERATION THEATRE CHARGES	₹	51,400.00
14	OTHERS	₹	2,000.00
15	PHYSIOTHERAPY	₹	2,000.00
16	PROCEDURE CHARGES	₹	1,040.00
17	PROFESSIONAL TEAM FEES	₹	149,500.00
18	RADIOLOGY	₹	3,050.00
	Gross Amount	₹	**287,610.00**
	Discount Amount	₹	**17,610.00**
	Net Payable	₹	**270,000.00**
	Advance Amount	₹	**80,000.00**
	Received Amount	₹	**190,000.00**

Received Amount in Words : Two Lakh Seventy Thousand Only

KRISHNAN
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/18/2024	MMH/MK/RECH202403000	UPI	Advance Amount	10,000.00
2	9/20/2024	MMH/MK/RECH202403028	UPI	Advance Amount	20,000.00
3	9/18/2024	MMH/MK/RECH202402999	CARD	Advance Amount	20,000.00
4	9/23/2024	MMH/MK/RECH202403073	CARD	Advance Amount	30,000.00
5	9/25/2024	MMH/MK/REDH202408499	CARD	Collected Amount	43,000.00
6	9/25/2024	MMH/MK/REDH202408500	CASH	Collected Amount	147,000.00

S.No	Description	Amount