

IN PATIENT SUMMARY BILL

UHID : MKB202405556

IP No : IPKB2024001328

Patient name : Mrs.INDHRA. D

Age : 62 Y 0 M 1 D/Female

Consultant Name : Dr.KARTHIK RAJ

Bill No : MMH/MK/IP202401305

Bill Date : 17/10/2024

DOA : 16/10/2024 3:10PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 150.00
2	BED CHARGES	₹ 4,050.00
3	CASUALTY	₹ 750.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 800.00
5	EQUIPMENT	₹ 600.00
6	INJECTION CHARGES	₹ 350.00
7	INTENSIVIST CHARGES	₹ 3,000.00
8	LABORATORY	₹ 13,827.00
9	MEDICAL RECORD CHARGE	₹ 200.00
10	NURSING CHARGE	₹ 1,000.00
11	PROCEDURE CHARGES	₹ 200.00
12	PROFESSIONAL TEAM FEES	₹ 3,250.00
13	RADIOLOGY	₹ 3,440.00
Gross Amount		₹ 31,617.00
Discount Amount		₹ 1,617.00
Net Payable		₹ 30,000.00
Received Amount		₹ 30,000.00

Received Amount in Words : Thirty Thousand Only

MANIMEGALAI.T
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/17/2024	MMH/MK/REDH202409052	UPI	Collected Amount	10,000.00
2	10/17/2024	MMH/MK/REDH202409051	CASH	Collected Amount	20,000.00