

IN PATIENT SUMMARY BILL

UHID : MHK202403334 Bill No : MMH/KM/IPK202400358
 IP No : IPK2024000350 Bill Date : 01/08/2024
 Patient name : Master.DULLA TEJ KUMAR DOA : 22/7/2024 3:44PM
 Age : 14 Y 0 M 10 D/Male DOD :
 Entity Type : Corporate
 Entity Name : AAROGYASRI
 Consultant Name : Dr.N.SURYA PRASAD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 100.00
2	BED CHARGES	₹ 5,250.00
3	DIET CHARGES	₹ 700.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,850.00
5	EQUIPMENT	₹ 500.00
6	GENERAL PROCEDURE	₹ 900.00
7	IMPLANT	₹ 1,800.00
8	MEDICAL RECORD CHARGE	₹ 150.00
9	NURSING CHARGE	₹ 3,500.00
10	OPERATION THEATRE CHARGES	₹ 6,850.00
11	PHARMACY CHARGE	₹ 2,899.00
12	RADIOLOGY	₹ 630.00
13	SURGICAL TEAM FEES	₹ 10,000.00
14	TRANSPORT	₹ 100.00
		₹ 37,229.00
		₹ 12,229.00
		₹ 25,000.00
		₹ 0.00

Received Amount in Words : Zero Only

TRIPURARI MALLIKARJUN

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1					