

IN PATIENT SUMMARY BILL

UHID : MHK202403567

IP No : IPK2024000401

Patient name : Mrs.KILLADI CHITAMMA

Age : 71 Y 0 M 14 D/Female

Consultant Name : Dr.N.SURYA PRASAD

Bill No : MMH/KM/IPK202400409

Bill Date : 27/08/2024

DOA : 19/8/2024 12:44PM

DOD :

Entity Type : Corporate

Entity Name : AAROGYASRI

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 100.00
2	BED CHARGES	₹ 3,750.00
3	BLOOD COMPONENTS	₹ 1,500.00
4	DIET CHARGES	₹ 500.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 2,750.00
6	EQUIPMENT	₹ 500.00
7	GENERAL PROCEEDURE	₹ 1,400.00
8	IMPLANT	₹ 5,238.00
9	MEDICAL RECORD CHARGE	₹ 150.00
10	NURSING CHARGE	₹ 2,500.00
11	OPERATION THEATRE CHARGES	₹ 6,850.00
12	PHARMACY CHARGE	₹ 5,247.00
13	RADIOLOGY	₹ 630.00
14	SURGICAL TEAM FEES	₹ 12,000.00
15	TRANSPORT	₹ 100.00
Gross Amount		₹ 43,215.00
Discount Amount		₹ 10,315.00
Net Payable		₹ 32,900.00
Received Amount		₹ 0.00

Received Amount in Words : Zero Only

RAYAPUREDDI
Authorised Signature

Payment History

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