

### IN PATIENT SUMMARY BILL

UHID : MHK202403718      Bill No : MMH/KM/IPK202400439  
 IP No : IPK2024000417      Bill Date : 09/09/2024  
 Patient name : Mr.P.VEERRAJU      DOA : 26/8/2024 4:04PM  
 Age : 73 Y 0 M 14 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	₹ 10,500.00
3	DIET CHARGES	₹ 900.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 4,900.00
5	EQUIPMENT	₹ 2,800.00
6	GENERAL PROCEEDURE	₹ 1,400.00
7	IMPLANT	₹ 16,000.00
8	INTENSIVIST CHARGES	₹ 1,500.00
9	LABORATORY	₹ 826.00
10	MEDICAL RECORD CHARGE	₹ 150.00
11	NURSING CHARGE	₹ 5,500.00
12	OPERATION THEATRE CHARGES	₹ 15,350.00
13	PHARMACY CHARGE	₹ 20,245.00
14	RADIOLOGY	₹ 1,660.00
15	SURGICAL TEAM FEES	₹ 51,000.00
		<b>₹ 132,831.00</b>
		<b>₹ 132,247.00</b>
		<b>₹ 584.00</b>
		<b>₹ 132,247.00</b>
		<b>₹ 0.00</b>

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					