

IN PATIENT SUMMARY BILL

UHID : MHK202403956 Bill No : MMH/KM/IPK202400488
 IP No : IPK2024000474 Bill Date : 26/09/2024
 Patient name : Mr.SABBI BARGAV DOA : 16/9/2024 3:18PM
 Age : 21 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	₹ 3,000.00
3	DIET CHARGES	₹ 400.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 2,200.00
5	EQUIPMENT	₹ 500.00
6	MEDICAL RECORD CHARGE	₹ 150.00
7	NURSING CHARGE	₹ 2,000.00
8	OPERATION THEATRE CHARGES	₹ 11,850.00
9	PHARMACY CHARGE	₹ 3,657.00
10	PROCEDURE CHARGES	₹ 450.00
11	RADIOLOGY	₹ 630.00
12	SURGICAL TEAM FEES	₹ 7,000.00
13	TRANSPORT	₹ 100.00

Gross Amount	₹ 32,037.00
Sanction Amount	₹ 15,000.00
Discount Amount	₹ 17,037.00
Net Payable	₹ 15,000.00
Received Amount	₹ 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					