

IN PATIENT SUMMARY BILL

UHID : MHK202403800

IP No : IPK2024000491

Patient name : Mrs.GANTA VEERALAKSHMI

Age : 24 Y 0 M 27 D/Female

Consultant Name : Dr.N. KINNERA VEENA

Bill No : MMH/KM/IPK202400499

Bill Date : 30/09/2024

DOA : 23/9/2024 2:32PM

DOD :

Entity Type : Corporate

Entity Name : AAROGYASRI

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 100.00
2	BED CHARGES	₹ 6,750.00
3	DIET CHARGES	₹ 400.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 2,150.00
5	EQUIPMENT	₹ 1,000.00
6	INTENSIVIST CHARGES	₹ 1,500.00
7	LABORATORY	₹ 50.00
8	MEDICAL RECORD CHARGE	₹ 150.00
9	NURSING CHARGE	₹ 3,000.00
10	OPERATION THEATRE CHARGES	₹ 2,500.00
11	PHARMACY CHARGE	₹ 7,327.00
12	PROCEDURE CHARGES	₹ 500.00
13	RADIOLOGY	₹ 400.00
14	SURGICAL TEAM FEES	₹ 7,000.00
15	TRANSPORT	₹ 100.00
Gross Amount		₹ 32,927.00
Sanction Amount		₹ 13,350.00
Discount Amount		₹ 19,577.00
Net Payable		₹ 13,350.00
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					