

IN PATIENT SUMMARY BILL

UHID : MHK202403986 Bill No : MMH/KM/IPK202400501
 IP No : IPK2024000479 Bill Date : 30/09/2024
 Patient name : Ms.PENDYALA.DURGA DOA : 18/9/2024 10:43PM
 Age : 19 Y 0 M 12 D/Female DOD :
 Entity Type : Corporate
 Entity Name : AAROGYASRI
 Consultant Name : Dr.N.SURYA PRASAD

S.No	Description	Amount
1	ACCIDENT / TRAUMA (MLC) REGISTRATION	₹ 500.00
2	ADMINISTRATION CHARGES	₹ 100.00
3	BED CHARGES	₹ 4,500.00
4	BLOOD COMPONENTS	₹ 1,500.00
5	DIET CHARGES	₹ 600.00
6	DUTY MEDICAL OFFICER CHARGE	₹ 3,300.00
7	EQUIPMENT	₹ 500.00
8	IMPLANT	₹ 8,400.00
9	LABORATORY	₹ 150.00
10	MEDICAL RECORD CHARGE	₹ 150.00
11	NURSING CHARGE	₹ 3,000.00
12	OPERATION THEATRE CHARGES	₹ 14,350.00
13	PHARMACY CHARGE	₹ 9,020.00
14	PROCEDURE CHARGES	₹ 950.00
15	RADIOLOGY	₹ 630.00
16	SURGICAL TEAM FEES	₹ 16,000.00
17	TRANSPORT	₹ 100.00
		₹ 63,750.00
		₹ 40,000.00
		₹ 23,750.00
		₹ 40,000.00
		₹ 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					