

IN PATIENT SUMMARY BILL

UHID	: MH06681	Bill No	: MMH/MH/IP202401712
IP No	: IP2024001747	Bill Date	: 09/08/2024
Patient name	: Mrs.LEENA JASMINE MARY.K	DOA	: 4/8/2024 2:48PM
Age	: 44 Y 0 M 5 D/Female	DOD	:
		Entity Type	: Insurance
		Entity Name	: FUTURE GENERALI INDIA
Consultant Name	: Dr.T.PALANIAPPAN	TPA	: INDIAN HEALTH INSURANCE TPA PRIVATE LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 19,800.00
3	DIET CHARGES	₹ 2,500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,000.00
5	LABORATORY	₹ 12,266.00
6	NURSING CHARGE	₹ 3,200.00
7	OTHER ADDITION	₹ 2,584.00
8	PHARMACY CHARGE	₹ 9,293.00
9	PROFESSIONAL TEAM FEES	₹ 8,800.00
10	RADIOLOGY	₹ 2,400.00
Gross Amount		₹ 64,193.00
Sanction Amount		₹ 58,685.00
Net Payable		₹ 64,193.00
Advance Amount		₹ 5,508.00
Received Amount		₹ 0.00

Received Amount in Words : Five Thousand Five Hundred Eight Only

SUDHA.M
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/4/2024	MMH/MH/RECH202402993	CARD	Advance Amount	3,000.00
2	8/8/2024	MMH/MH/RECH202403057	CARD	Advance Amount	2,508.00

Medical Claim	Claim No	Sanction Amount
FUTURE GENERALI INDIA INSURANCE COMPANY LTD	CHE-0824-PA-0000813	58,685.00