IN PATIENT SUMMARY BILL

UHID : MH17575 Bill No : MMH/MH/IP00248

IP No : IP2023002720 Bill Date : 29/12/2023

Patient name : Ms.SIVAKAMASUNDARI DOA : 13/12/2023 8:39PM

Age : 74/Female DOD

Entity Type : Insurance

Entity Name : THE NEW INDIA

Consultant Name Dr.T.PALANIAPPAN TPA TPA MESURASISE CODIATTPA

PVT LTD

₹

2,211.00

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	96,000.00
3	DIET CHARGES		₹	10,200.00
4	DUTY MEDICAL OFFICER CHARGE		₹	4,900.00
5	EQUIPMENT		₹	6,000.00
6	INJECTION CHARGES		₹	200.00
7	INTENSIVIST CHARGES		₹	9,000.00
8	LABORATORY		₹	23,523.00
9	NURSING CHARGE		₹	11,250.00
10	OPERATION THEATRE CHARGES		₹	9,500.00
11	OTHER ADDITION		₹	26,225.00
12	PHARMACY CHARGE		₹	43,649.00
13	PHYSIOTHERAPY		₹	3,000.00
14	PROFESSIONAL TEAM FEES		₹	70,200.00
15	RADIOLOGY		₹	7,925.00
16	ULTRASOUND		₹	2,000.00
Tax	Amount : 3,675.00	Gross Amount	₹	327,597.00
		Sanction Amount	₹	81,689.00
		Net Payable	₹	327,597.00
		Advance Amount	₹	215,900.00
		Advance Amount		213,900.00
		Received Amount	₹	32,219.00

Received Amount in Words : Two Lakh Forty-Eight Thousand One Hundred KARTHIK C

Nineteen Only Authorised Signature

Refund Amount

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	14/12/2023	MMH/MH/RECH00331	CASH	Advance Amount	75,000.00
2	23/12/2023	MMH/MH/RECH00453	CARD	Advance Amount	100,000.00
3	27/12/2023	MMH/MH/RECH00495	CASH	Advance Amount	40,900.00
4	29/12/2023	MMH/MH/REDH02691	CHEQUE	Collected Amount	32,219.00

Medical Claim	Claim No	Sanction Amount
THE NEW INDIA ASSURANCE CO. LTD	35754664	81,689.00