IN PATIENT SUMMARY BILL

UHID : MH24338 Bill No : MMH/MH/IP202401755

IP No : IP2024001652 Bill Date : 16/08/2024

Patient name : Mr.VENKATARAMAN R DOA : 23/7/2024 12:28PM

Age : 78 Y 7 M 28 D/Male DOD

: Dr.T.PALANIAPPAN

Entity Type : Insurance

Entity Name : UNIVERSAL SAMPO GEN

INSURANCE

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	50,400.00
3	DIET CHARGES		₹	10,800.00
4	DUTY MEDICAL OFFICER CHARGE		₹	9,000.00
5	EQUIPMENT		₹	7,800.00
6	GENERAL PROCEEDURE		₹	1,000.00
7	INJECTION CHARGES		₹	200.00
8	LABORATORY		₹	47,008.00
9	NURSING CHARGE		₹	9,600.00
10	OPERATION THEATRE CHARGES		₹	8,450.00
11	OTHER ADDITION		₹	2,924.00
12	PHARMACY CHARGE		₹	67,464.00
13	PHYSIOTHERAPY		₹	5,400.00
14	PROFESSIONAL TEAM FEES		₹	46,200.00
15	RADIOLOGY		₹	7,280.00
		Gross Amount	₹	273,876.00
		Sanction Amount	₹	240,117.00
		Net Payable	₹	273,876.00
		Advance Amount	₹	33,759.00
		Received Amount	₹	0.00

Received Amount in Words : Thirty-Three Thousand Seven Hundred Fifty-Nine Only KARTHICK
Authorised Signature

Payment History

Consultant Name

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/23/2024	MMH/MH/RECH202402800	CARD	Advance Amount	5,000.00
2	8/9/2024	MMH/MH/RECH202403065	UPI	Advance Amount	28,659.00
3	8/15/2024	MMH/MH/RECH202403144	UPI	Advance Amount	100.00

Medical Claim	Claim No	Sanction Amount
UNIVERSAL SAMPO GEN INSURANCE	528052	240,117.00