

IN PATIENT SUMMARY BILL

UHID	:	MH36406	Bill No	:	MMH/MH/IP202401759
IP No	:	IP2024001750	Bill Date	:	17/08/2024
Patient name	:	Mr.MUKUNDAN A	DOA	:	5/8/2024 11:36AM
Age	:	42 Y 4 M 30 D/Male	DOD	:	
			Entity Type	:	Insurance
			Entity Name	:	UNITED INDIA INSURANCE CO LTD
Consultant Name	:	Dr.T.PALANIAPPAN	TPA	:	VIDAL HEALTH INSURANCE TPA PRIVATE LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 33,600.00
3	DIET CHARGES	₹ 5,050.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 6,000.00
5	LABORATORY	₹ 59,360.00
6	NURSING CHARGE	₹ 6,400.00
7	OTHER ADDITION	₹ 11,319.00
8	PHARMACY CHARGE	₹ 47,460.00
9	PROFESSIONAL TEAM FEES	₹ 28,600.00
10	RADIOLOGY	₹ 6,464.00
Gross Amount		₹ 204,603.00
Sanction Amount		₹ 195,453.00
Net Payable		₹ 204,603.00
Received Amount		₹ 0.00
Amount Payable		₹ 9,150.00

Remarks : SUNDARAM CLAYTON PATIENT (INSURANCE PATIENT)
PATIENT NAME : MUKUNDAN
IP NO: IP2024001750

Received Amount in Words : Zero Only

SUDHA
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1					

Medical Claim	Claim No	Sanction Amount
UNITED INDIA INSURANCE CO LTD	CHE-0824-PA-0000832	195,453.00