

IN PATIENT SUMMARY BILL

UHID : MHI202371364

IP No : IPH2024000722

Patient name : Mrs.JOTHI RADHAKRISHNAN

Age : 61 Y 3 M 27 D/Female

Bill No : MMH/HM/IPH202400724

Bill Date : 29/03/2024

DOA : 26/3/2024 7:40PM

DOD :

Entity Type : Corporate

Entity Name : CGHS

Consultant Name : Dr.K.JAISHANKAR

S.No	Description	Amount
1	GENERAL PROCEDURE	₹ 27,108.00
2	IMPLANT	₹ 395,971.00
3	LABORATORY	₹ 216.00
4	PHARMACY CHARGE	₹ 21,666.00
5	RADIOLOGY	₹ 460.00
Gross Amount		₹ 445,421.00
Sanction Amount		₹ 445,421.00
Net Payable		₹ 445,421.00
Received Amount		₹ 0.00

Received Amount in Words : Zero Only

PRAVEEN KUMAR
Authorised Signature

Payment History

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

Medical Claim	Claim No	Sanction Amount
CGHS	4790092	445,421.00