

IN PATIENT SUMMARY BILL

UHID	: MHI202379029	Bill No	: MMH/HM/IPH202400720
IP No	: IPH2024000689	Bill Date	: 29/03/2024
Patient name	: Mr.BOOMINATHAN.P	DOA	: 21/3/2024 11:30AM
Age	: 54/Male	DOD	:
		Entity Type	: Insurance
		Entity Name	: IFFCO TOKIYO GENERAL INSURANCE
Consultant Name	: Dr.RAJESH.V		

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 1,100.00
2	BED CHARGES	₹ 34,800.00
3	BLOOD COMPONENTS	₹ 500.00
4	DIET CHARGES	₹ 7,800.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 3,200.00
6	EQUIPMENT	₹ 12,000.00
7	GENERAL PROCEDURE	₹ 650.00
8	INTENSIVIST CHARGES	₹ 5,000.00
9	LABORATORY	₹ 18,034.00
10	MEDICAL RECORD CHARGE	₹ 200.00
11	NURSING CHARGE	₹ 7,200.00
12	OP REGISTRATION	₹ 150.00
13	OPERATION THEATRE CHARGES	₹ 31,250.00
14	PHARMACY CHARGE	₹ 87,479.00
15	PHYSIOTHERAPY	₹ 8,400.00
16	PROFESSIONAL TEAM FEES	₹ 108,000.00
17	RADIOLOGY	₹ 9,056.00
18	SURGICAL PACKAGE-HEART	₹ 71,481.00
Gross Amount		₹ 406,300.00
Sanction Amount		₹ 374,595.00
Net Payable		₹ 406,300.00
Advance Amount		₹ 102,000.00
Received Amount		₹ 0.00
Refund Amount		₹ 70,295.00

Received Amount in Words : One Lakh Two Thousand Only

PRAVEEN KUMAR
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	21/03/2024	MMH/HM/RECAP2024007	CARD	Advance Amount	100,000.00
2	27/03/2024	MMH/HM/RECAP2024008	UPI	Advance Amount	2,000.00

Medical Claim	Claim No	Sanction Amount
IFFCO TOKIYO GENERAL INSURANCE	6628235/6653543	374,595.00