

IN PATIENT SUMMARY BILL

UHID	:	MHI202380545	Bill No	:	MMH/HM/IPH00209
IP No	:	IPH202302178	Bill Date	:	06/11/2023
Patient name	:	Mr.SURESH K	DOA	:	2/11/2023 11:47AM
Age	:	39 Y 7 M 5 D/Male	DOD	:	
Consultant Name	:	Dr.K.JAISHANKAR	Entity Type	:	Insurance
			Entity Name	:	FUTURE GENERAL INSURANCE

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 200.00
2	BED CHARGES	₹ 9,000.00
3	CARDIOLOGY PACKAGE-HEART	₹ 98,880.00
4	DIET CHARGES	₹ 5,200.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 4,000.00
6	GENERAL PROCEDURE	₹ 500.00
7	IMPLANT	₹ 72,800.00
8	LABORATORY	₹ 6,072.00
9	MEDICAL RECORD CHARGE	₹ 200.00
10	NURSING CHARGE	₹ 4,000.00
11	OP REGISTRATION	₹ 150.00
12	PHARMACY CHARGE	₹ 10,086.00
13	PROFESSIONAL TEAM FEES	₹ 112,870.00
14	RADIOLOGY	₹ 400.00
		₹ 324,358.00
		₹ 317,042.00
		₹ 7,316.00
		₹ 317,042.00
		₹ 0.00

Received Amount in Words : Zero Only

IYAPPAN R

Authorised Signature

Payment History

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

Medical Claim	Claim No	Sanction Amount
FUTURE GENERAL INSURANCE	13-FGH-23-3-397426-01	317,042.00