

IN PATIENT SUMMARY BILL

UHID : MHI202381035
IP No : IPH202302489
Patient name : Mr.PANDURANGAN PERUMAL
Age : 70 Y 11 M 19 D/Male

Bill No : MMH/HM/IPH00551
Bill Date : 20/12/2023
DOA : 12/12/2023 12:48PM
DOD :
Entity Type : Insurance
Entity Name : CMCHIS INSURANCE

Consultant Name : Dr.ANBARASU MOHANRAJ

S.No	Description	Amount
1	BLOOD COMPONENTS	₹ 500.00
2	LABORATORY	₹ 5,769.00
3	PHARMACY CHARGE	₹ 64,410.00
4	RADIOLOGY	₹ 5,195.00
5	SURGICAL PACKAGE-HEART	₹ 21,626.00
Gross Amount		₹ 97,500.00
Sanction Amount		₹ 97,500.00
Net Payable		₹ 97,500.00
Received Amount		₹ 0.00

Received Amount in Words : Zero Only

SANTHOSH
Authorised Signature

Payment History

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

Medical Claim	Claim No	Sanction Amount
CMCHIS INSURANCE	12_2257558453227	97,500.00