IN PATIENT SUMMARY BILL

UHID : MHI202381064 Bill No : MMH/HM/IPH00399

IP No : IPH202302386 Bill Date : 29/11/2023

Patient name Mrs.LEEMA ROSE A DOA 29/11/2023 10:25AM

Age : 50 Y 0 M 9 D/Female DOD

Entity Type : Corporate

Entity Name : ESI

Consultant Name : Dr.G. GNANAVELU

S.No	Description			Amount
1	CARDIOLOGY PACKAGE-HEART		₹	5,168.00
2	PHARMACY CHARGE		₹	5,545.00
		Gross Amount	₹	10,713.00
		Sanction Amount	₹	10,713.00
		Net Payable	₹	10,713.00
		Received Amount	₹	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
ESI	5638307	10,713.00