

IN PATIENT SUMMARY BILL

UHID	:	MHI202381085	Bill No	:	MMH/HM/IPH00418
IP No	:	IPH202302402	Bill Date	:	30/11/2023
Patient name	:	Mrs.RATHINAM.M	DOA	:	30/11/2023 10:47AM
Age	:	53 Y 5 M 19 D/Female	DOD	:	
			Entity Type	:	Corporate
			Entity Name	:	ESI
Consultant Name	:	Dr.K.JAISHANKAR			

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 5,088.00
2	PHARMACY CHARGE	₹ 5,625.00
	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	5642290	10,713.00