

IN PATIENT SUMMARY BILL

UHID : MHI202381152
IP No : IPH202302496
Patient name : Mrs.KASTHURI.D
Age : 65 Y 6 M 3 D/Female

Bill No : MMH/HM/IPH00509
Bill Date : 13/12/2023
DOA : 13/12/2023 11:01AM
DOD :
Entity Type : Corporate
Entity Name : ESI

Consultant Name : Dr.K.JAISHANKAR

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 5,008.00
2	PHARMACY CHARGE	₹ 5,705.00
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	5673650	10,713.00