IN PATIENT SUMMARY BILL

UHID : MMH202371786 Bill No : MMH/MH/IP00141

IP No : IP2023002680 Bill Date : 14/12/2023

Patient name Mrs.SANTHAKUMARI S DOA : 9/12/2023 11:07AM

Age : 71 Y 10 M 28 D/Female DOD

Entity Type : Insurance Entity Name : UNITED INDIA

Consultant Name : Dr.T.PALANIAPPAN TPA : WISHRANGALTHO LTD

INSURANCE TPA PRIVATE

LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 25,800.00
3	DIET CHARGES	₹ 5,950.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 2,100.00
5	EQUIPMENT	₹ 18,100.00
6	INTENSIVIST CHARGES	₹ 9,000.00
7	LABORATORY	₹ 31,866.00
8	NURSING CHARGE	₹ 8,250.00
9	OTHER ADDITION	₹ 11,111.00
10	PHARMACY CHARGE	₹ 57,843.00
11	PHYSIOTHERAPY	₹ 3,500.00
12	PROFESSIONAL FEES	₹ 17,750.00
13	RADIOLOGY	₹ 16,400.00

 Gross Amount
 ₹
 208,020.00

 Sanction Amount
 ₹
 196,201.00

 Discount Amount
 ₹
 11,819.00

 Net Payable
 ₹
 196,201.00

 Received Amount
 ₹
 0.00

Received Amount in Words : Zero Only RAVI

Authorised Signature

Payment History

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

Medical Claim	Claim No	Sanction Amount
UNITED INDIA INSURANCE CO LTD	CHE-1223-PA-0001760	196,201.00