

IN PATIENT SUMMARY BILL

UHID	: MHI202381246	Bill No	: MMH/HM/IPH00640
IP No	: IPH2023002595	Bill Date	: 29/12/2023
Patient name	: Mr.RAMAMOORTHY	DOA	: 26/12/2023 10:40AM
Age	: 62 Y 11 M 10 D/Male	DOD	:
		Entity Type	: Insurance
		Entity Name	: ADITHIYA BRILA
Consultant Name	: Dr.G. GNANAVELU	TPA	: MEDIANET INDIA TPA PVT LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 1,100.00
2	BED CHARGES	₹ 10,250.00
3	DIET CHARGES	₹ 2,100.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 800.00
5	EQUIPMENT	₹ 1,000.00
6	GENERAL PROCEDURE	₹ 500.00
7	IMPLANT	₹ 135,107.00
8	INTENSIVIST CHARGES	₹ 2,500.00
9	LABORATORY	₹ 2,094.00
10	MEDICAL RECORD CHARGE	₹ 200.00
11	NURSING CHARGE	₹ 2,800.00
12	OP REGISTRATION	₹ 150.00
13	PHARMACY CHARGE	₹ 20,703.00
14	PROFESSIONAL TEAM FEES	₹ 18,602.00
15	RADIOLOGY	₹ 1,440.00
Gross Amount		₹ 199,346.00
Sanction Amount		₹ 164,624.00
Net Payable		₹ 199,346.00
Advance Amount		₹ 34,722.00
Received Amount		₹ 0.00

Received Amount in Words : Thirty-Four Thousand Seven Hundred
Twenty-Two Only

IYAPPAN R
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	28/12/2023	MMH/HM/RECAP00720	UPI	Advance Amount	34,722.00

Medical Claim	Claim No	Sanction Amount
ADITHIYA BRILA INSURANCE	35867643	164,624.00