

IN PATIENT SUMMARY BILL

UHID	: MHI202381271	Bill No	: MMH/HM/IPH202400008
IP No	: IPH2023002615	Bill Date	: 03/01/2024
Patient name	: Mr.VENKATACHALAM P	DOA	: 27/12/2023 12:19PM
Age	: 63 Y 5 M 21 D/Male	DOD	:
		Entity Type	: Insurance
		Entity Name	: THE NEW INDIA
Consultant Name	: Dr.ANBARASU MOHANRAJ	TPA	: THE NEW INDIA ASSURANCE CO. LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 200.00
2	BED CHARGES	₹ 26,000.00
3	BLOOD COMPONENTS	₹ 500.00
4	LABORATORY	₹ 22,184.00
5	PHARMACY CHARGE	₹ 86,203.00
6	RADIOLOGY	₹ 4,788.00
7	SURGICAL PACKAGE-HEART	₹ 52,853.00
8	ULTRASOUND	₹ 2,772.00
Gross Amount		₹ 195,500.00
Sanction Amount		₹ 195,500.00
Net Payable		₹ 195,500.00
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
THE NEW INDIA ASSURANCE CO. LTD	118262962	195,500.00