

IN PATIENT SUMMARY BILL

UHID : MHI202381314

IP No : IPH202302511

Patient name : Mr.SELVA KUMAR V

Age : 54 Y 8 M 18 D/Male

Consultant Name : Dr.G. GNANAVELU

Bill No : MMH/HM/IPH00525

Bill Date : 16/12/2023

DOA : 15/12/2023 10:08AM

DOD :

Entity Type : Insurance

Entity Name : STAR HEALTH AND ALLIED INSURANCE

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 12,079.00
2	LABORATORY	₹ 156.00
3	PHARMACY CHARGE	₹ 5,765.00
Gross Amount		₹ 18,000.00
Sanction Amount		₹ 14,400.00
Net Payable		₹ 18,000.00
Advance Amount		₹ 10,300.00
Received Amount		₹ 0.00
Refund Amount		₹ 6,700.00

Received Amount in Words : Ten Thousand Three Hundred Only

SANTHOSH

Authorised Signature

Payment History

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

Medical Claim	Claim No	Sanction Amount
STAR HEALTH AND ALLIED INSURANCE	CIR/2024/700001/1304575	14,400.00