

**IN PATIENT SUMMARY BILL**

UHID : MMH202372119  
IP No : IP2023002737  
Patient name : Mrs.CHITHRA S  
Age : 28 Y 8 M 4 D/Female

Bill No : MMH/MH/IP00176  
Bill Date : 19/12/2023  
DOA : 16/12/2023 6:17PM  
DOD :  
Entity Type : Insurance  
Entity Name : HDFC ERGO General  
INSURANCE

Consultant Name : Dr.PADMA SRI

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 8,400.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,400.00
4	EQUIPMENT	₹ 500.00
5	GENERAL PROCEDURE	₹ 500.00
6	LABORATORY	₹ 173.00
7	NURSING CHARGE	₹ 1,500.00
8	OPERATION THEATRE CHARGES	₹ 7,350.00
9	OTHER ADDITION	₹ 11,448.00
10	PHARMACY CHARGE	₹ 14,298.00
11	PROFESSIONAL TEAM FEES	₹ 48,400.00
<b>Gross Amount</b>		₹ <b>94,319.00</b>
<b>Sanction Amount</b>		₹ <b>75,000.00</b>
<b>Net Payable</b>		₹ <b>94,319.00</b>
<b>Advance Amount</b>		₹ <b>19,319.00</b>
<b>Received Amount</b>		₹ <b>0.00</b>

**Received Amount in Words** : Nineteen Thousand Three Hundred Nineteen  
Only

KARTHIK C  
**Authorised Signature**

**Payment History**

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	16/12/2023	MMH/MH/RECH00363	CASH	Advance Amount	5,000.00
2	19/12/2023	MMH/MH/RECH00395	CASH	Advance Amount	14,319.00

Medical Claim	Claim No	Sanction Amount
HDFC ERGO General INSURANCE	23121800396	75,000.00