

IN PATIENT SUMMARY BILL

UHID : MMH202372122

IP No : IP2024001691

Patient name : Mr.RAMAKRISHNAN M

Age : 76 Y 7 M 15 D/Male

Consultant Name : Dr.SHIVA KUMAR D

Bill No : MMH/MH/IP202401650

Bill Date : 31/07/2024

DOA : 28/7/2024 8:11PM

DOD :

Entity Type : Insurance

Entity Name : IFFCO TOKIYO GENERAL INSURANCE

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 8,600.00
3	DIALYSIS / DIALYZER	₹ 2,600.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 750.00
5	EQUIPMENT	₹ 1,800.00
6	GENERAL PROCEDURE	₹ 450.00
7	INTENSIVIST CHARGES	₹ 3,000.00
8	LABORATORY	₹ 6,374.00
9	NURSING CHARGE	₹ 2,800.00
10	OTHER ADDITION	₹ 1,202.00
11	PHARMACY CHARGE	₹ 3,133.00
12	PROFESSIONAL TEAM FEES	₹ 7,700.00
13	RADIOLOGY	₹ 1,380.00
Gross Amount		₹ 40,139.00
Sanction Amount		₹ 35,111.00
Net Payable		₹ 40,139.00
Advance Amount		₹ 10,000.00
Received Amount		₹ 3,133.00
Refund Amount		₹ 8,105.00

Received Amount in Words : Thirteen Thousand One Hundred Thirty-Three Only

SUDHA.M
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/28/2024	MMH/MH/RECH202402877	CASH	Advance Amount	10,000.00
2	7/31/2024	MMH/MH/REDH202416711	CHEQUE	Collected Amount	3,133.00

Medical Claim	Claim No	Sanction Amount
IFFCO TOKIYO GENERAL INSURANCE	2024073000149	35,111.00