

IN PATIENT SUMMARY BILL

UHID	: MHI202481606	Bill No	: MMH/HM/IPH202400881
IP No	: IPH2024000830	Bill Date	: 15/04/2024
Patient name	: Ms.SANDHIYA GANESAMOORTHY	DOA	: 6/4/2024 12:27PM
Age	: 24 Y 9 M 16 D/Female	DOD	:
		Entity Type	: Insurance
		Entity Name	: THE NEW INDIA ASSURANCE CO.
Consultant Name	: Dr.ANBARASU MOHANRAJ	TPA	: MEDDIASSIST INDIA TPA PVT LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 1,100.00
2	BED CHARGES	₹ 44,700.00
3	BLOOD COMPONENTS	₹ 4,600.00
4	DIET CHARGES	₹ 9,400.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 4,800.00
6	EQUIPMENT	₹ 23,300.00
7	GENERAL PROCEDURE	₹ 6,900.00
8	INTENSIVIST CHARGES	₹ 5,000.00
9	IP REGISTRATION	₹ 150.00
10	LABORATORY	₹ 25,880.00
11	MEDICAL RECORD CHARGE	₹ 200.00
12	NURSING CHARGE	₹ 8,800.00
13	OPERATION THEATRE CHARGES	₹ 30,750.00
14	PHARMACY CHARGE	₹ 127,208.00
15	PHYSIOTHERAPY	₹ 9,100.00
16	PROFESSIONAL TEAM FEES	₹ 130,000.00
17	RADIOLOGY	₹ 5,828.00
18	SURGICAL PACKAGE-HEART	₹ 37,886.00

Gross Amount	₹ 475,602.00
Net Payable	₹ 475,602.00
Advance Amount	₹ 120,128.00
Received Amount	₹ 0.00

Received Amount in Words	: One Lakh Twenty Thousand One Hundred Twenty-Eight Only	PRAVEEN Authorised Signature
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Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	15/04/2024	MMH/HM/RECAP2024010	CARD	Advance Amount	120,128.00