

IN PATIENT SUMMARY BILL

UHID : MMH202472752

IP No : IP2024000032

Patient name : Mr.PRADEEP KUMAR THIRUNAVUKKAR

Age : 33 Y 8 M 6 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202400090

Bill Date : 12/01/2024

DOA : 4/1/2024 10:02PM

DOD :

Entity Type : Insurance

Entity Name : UNITED INDIA INSURANCE CO LTD

TPA : UNITED INDIA INSURANCE CO LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 13,750.00
3	DIET CHARGES	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,500.00
5	LABORATORY	₹ 15,707.00
6	NURSING CHARGE	₹ 3,750.00
7	OTHER ADDITION	₹ 8,420.00
8	PHARMACY CHARGE	₹ 15,624.00
9	PROFESSIONAL TEAM FEES	₹ 8,250.00
10	RADIOLOGY	₹ 7,680.00
11	ULTRASOUND	₹ 2,000.00
Gross Amount		₹ 79,531.00
Sanction Amount		₹ 73,721.00
Net Payable		₹ 79,531.00
Advance Amount		₹ 5,810.00
Received Amount		₹ 0.00

Received Amount in Words : Five Thousand Eight Hundred Ten Only

KEERTHIKA

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	04/01/2024	MMH/MH/RECH20240001	UPI	Advance Amount	3,000.00
2	09/01/2024	MMH/MH/RECH20240011	CASH	Advance Amount	2,810.00

Medical Claim	Claim No	Sanction Amount
UNITED INDIA INSURANCE CO LTD	54522232674045	73,721.00