

IN PATIENT SUMMARY BILL

UHID : MMH202472757

IP No : IP2024000035

Patient name : Mrs.CHITRA E

Age : 49 Y 8 M 4 D/Female

Consultant Name : Dr.VENKATACHALAM VEERAPPAN

Bill No : MMH/MH/IP202400052

Bill Date : 08/01/2024

DOA : 5/1/2024 7:35AM

DOD :

Entity Type : Insurance

Entity Name : THE NEW INDIA

TPA : THE NEW INDIA TPA PVT LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 5,500.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,400.00
4	EQUIPMENT	₹ 600.00
5	INJECTION CHARGES	₹ 200.00
6	LABORATORY	₹ 23,417.00
7	NURSING CHARGE	₹ 1,500.00
8	OPERATION THEATRE CHARGES	₹ 9,100.00
9	OTHER ADDITION	₹ 3,926.00
10	PHARMACY CHARGE	₹ 7,393.00
11	PROFESSIONAL TEAM FEES	₹ 55,000.00
12	RADIOLOGY	₹ 400.00
13	ULTRASOUND	₹ 2,000.00
Gross Amount		₹ 110,786.00
Sanction Amount		₹ 95,397.00
Net Payable		₹ 110,786.00
Advance Amount		₹ 15,389.00
Received Amount		₹ 0.00

Received Amount in Words : Fifteen Thousand Three Hundred Eighty-Nine Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	05/01/2024	MMH/MH/RECH20240001	CASH	Advance Amount	3,000.00
2	06/01/2024	MMH/MH/RECH20240002	CASH	Advance Amount	12,389.00

Medical Claim	Claim No	Sanction Amount
THE NEW INDIA ASSURANCE CO. LTD	36021255	95,397.00