IN PATIENT SUMMARY BILL

UHID : MHI202481646 Bill No : MMH/HM/IPH202400094

IP No : IPH2024000100 Bill Date : 12/01/2024

Patient name Mrs.ALLY ETHIRAJ DOA : 12/1/2024 8:48AM

Age : 63 Y 0 M 28 D/Female DOD

Entity Type : Corporate

Entity Name : ESI

Consultant Name : Dr.K.JAISHANKAR

S.No	Description			Amount
1	CARDIOLOGY PACKAGE-HEART		₹	4,453.00
2	PHARMACY CHARGE		₹	6,260.00
		Gross Amount	₹	10,713.00
		Sanction Amount	₹	10,713.00
		Net Payable	₹	10,713.00
		Received Amount	₹	0.00

Received Amount in Words : Zero Only IYAPPAN R

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1					

Medical Claim	Claim No	Sanction Amount
ESI	5711780	10,713.00