

IN PATIENT SUMMARY BILL

UHID : MHI202481728

IP No : IPH2024000136

Patient name : Mrs.DOWLATH M A

Age : 54 Y 6 M 2 D/Female

Bill No : MMH/HM/IPH202400133

Bill Date : 18/01/2024

DOA : 18/1/2024 10:50AM

DOD :

Entity Type : Corporate

Entity Name : ESI

Consultant Name : Dr.K.JAISHANKAR

| S.No | Description | Amount |
|-----------------|--------------------------|-------------|
| 1 | CARDIOLOGY PACKAGE-HEART | ₹ 3,706.00 |
| 2 | PHARMACY CHARGE | ₹ 7,007.00 |
| 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 | 5732594 | 10,713.00 |