

IN PATIENT SUMMARY BILL

UHID : MHI202481777

IP No : IPH2024000198

Patient name : Mr.GURUSAMY R

Age : 74 Y 1 M 4 D/Male

Bill No : MMH/HM/IPH202400257

Bill Date : 05/02/2024

DOA : 29/1/2024 11:13AM

DOD :

Entity Type : Insurance

Entity Name : CMCHIS INSURANCE

Consultant Name : Dr.RAJESH.V

S.No	Description	Amount
1	BLOOD COMPONENTS	₹ 500.00
2	LABORATORY	₹ 4,773.00
3	PHARMACY CHARGE	₹ 56,950.00
4	RADIOLOGY	₹ 4,164.00
5	SURGICAL PACKAGE-HEART	₹ 28,341.00
6	ULTRASOUND	₹ 2,772.00
Gross Amount		₹ 97,500.00
Sanction Amount		₹ 97,500.00
Net Payable		₹ 97,500.00
Received Amount		₹ 0.00

Received Amount in Words : Zero Only

PRAVEEN KUMAR  
Authorised Signature

Payment History

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

Medical Claim	Claim No	Sanction Amount
CMCHIS INSURANCE	***	97,500.00