IN PATIENT SUMMARY BILL

UHID	:	MHI202482039	Bill No	:	MMH/HM/IPH202400208
IP No	:	IPH2024000211	Bill Date	:	31/01/2024
Patient name	:	Mr.MANI.P	DOA	:	30/1/2024 10:54AM
Age	:	73 Y 6 M 26 D/Male	DOD	:	
			Entity Type	:	Corporate
			Entity Name	:	ESI
Consultant Name	:	Dr.K.JAISHANKAR			

S.No	Description		Amount
1	CARDIOLOGY PACKAGE-HEART	₹	2,361.00
2	DIET CHARGES	₹	500.00
3	PHARMACY CHARGE	₹	7,852.00
	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

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
ESI	5768744	10,713.00