

IN PATIENT SUMMARY BILL

UHID : MHI202482383

IP No : IPH2024000399

Patient name : Mr.MANOHARAN

Age : 67 Y 7 M 5 D/Male

Consultant Name : Dr.K.JAISHANKAR

Bill No : MMH/HM/IPH202400383

Bill Date : 20/02/2024

DOA : 20/2/2024 9:50AM

DOD :

Entity Type : Corporate

Entity Name : CGHS

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 7,392.00
2	PHARMACY CHARGE	₹ 4,510.00
Gross Amount		₹ 11,902.00
Sanction Amount		₹ 11,902.00
Net Payable		₹ 11,902.00
Received Amount		₹ 0.00

Received Amount in Words : Zero Only

AKASH
Authorised Signature

Payment History

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

Medical Claim	Claim No	Sanction Amount
CGHS	8133341	11,902.00