

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