IN PATIENT SUMMARY BILL

: MMH/HM/IPH202400629 UHID : MHI202482542 Bill No

: IPH2024000603 : 18/03/2024 IP No Bill Date

: Mr.IYYAPPAN M DOA : 13/3/2024 12:45PM Patient name

: 41 Y 6 M 3 D/Male DOD Age

Entity Name . Corporate . For

Consultant Name · Dr.RAJESH.V

S.No	Description			Amount
1	BLOOD COMPONENTS		₹	500.00
2	LABORATORY		₹	3,142.00
3	PHARMACY CHARGE		₹	70,106.00
4	RADIOLOGY		₹	640.00
5	SURGICAL PACKAGE-HEART		₹	43,983.00
		Gross Amount	₹	118,371.00
		Sanction Amount	₹	118.371.00

₹ 118,371.00 Net Payable ₹ **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	5831779	118,371.00