IN PATIENT SUMMARY BILL

: MHI202482596 : MMH/HM/IPH202400450 UHID Bill No

: IPH2024000468 IP No : 27/02/2024 Bill Date

Patient name · Mr.ARUMUGAM : 27/2/2024 11:30AM DOA

: 57 Y 0 M 0 D/Male DOD Age

Entity Name Corporate

F.SI

Consultant Name : Dr.K.JAISHANKAR

| S.No | Description | | | Amount |
|------|--------------------------|-----------------|---|-----------|
| 1 | CARDIOLOGY PACKAGE-HEART | | ₹ | 1,663.00 |
| 2 | PHARMACY CHARGE | | ₹ | 10,240.00 |
| | | Gross Amount | ₹ | 11,903.00 |
| | | Sanction Amount | ₹ | 11,903.00 |
| | | Net Payable | ₹ | 11,903.00 |
| | | Received Amount | ₹ | 0.00 |

AKASH **Received Amount in Words** : Zero Only

Authorised Signature

Payment History

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

| Medical Claim | Claim No | Sanction Amount |
|---------------|----------|-----------------|
| ESI | 5835565 | 11,903.00 |