

IN PATIENT SUMMARY BILL

UHID : MHI202482668

IP No : IPH2024000490

Patient name : Mrs.PREMA

Age : 58 Y 2 M 1 D/Female

Consultant Name : Dr.K.JAISHANKAR

Bill No : MMH/HM/IPH202400483

Bill Date : 02/03/2024

DOA : 2/3/2024 10:50AM

DOD :

Entity Type : Corporate

Entity Name : ESI

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 6,295.00
2	PHARMACY CHARGE	₹ 5,608.00
Gross Amount		₹ 11,903.00
Sanction Amount		₹ 11,903.00
Net Payable		₹ 11,903.00
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
ESI	5845988	11,903.00