

IN PATIENT SUMMARY BILL

UHID : MHI202482724

IP No : IPH2024000518

Patient name : Mrs.JAYASREE

Age : 57 Y 4 M 19 D/Female

Bill No : MMH/HM/IPH202400507

Bill Date : 05/03/2024

DOA : 5/3/2024 11:17AM

DOD :

Entity Type : Corporate

Entity Name : ESI

Consultant Name : Dr.K.JAISHANKAR

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 3,815.00
2	PHARMACY CHARGE	₹ 8,088.00
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	5847326	11,903.00