IN PATIENT SUMMARY BILL

UHID	:	MHI202482833	Bill No	:	MMH/HM/IPH202400734
IP No	:	IPH2024000698	Bill Date	:	31/03/2024
Patient name	:	Mr.LOGANATHAN	DOA	:	23/3/2024 11:48AM
Age	:	72 Y 1 M 29 D/Male	DOD	:	
			Entity Type	:	Insurance
			Entity Name	:	CMCHIS INSURANCE
Consultant Name	:	Dr.RAJESH.V			

S.No	Description		Amount
1	BLOOD COMPONENTS	₹	500.00
2	LABORATORY	₹	8,108.00
3	PHARMACY CHARGE	₹	63,946.00
4	RADIOLOGY	₹	5,200.00
5	SURGICAL PACKAGE-HEART	₹	19,746.00
	Gross Amount	₹	**97,500.00**
	Sanction Amount	₹	**97,500.00**
	Net Payable	₹	**97,500.00**
	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
CMCHIS INSURANCE	13H_225760524919	97,500.00