

IN PATIENT SUMMARY BILL

UHID : MHI202483125

IP No : IPH2024000894

Patient name : Mr.NALLUSAMY(CM SHCEME)

Age : 52 Y 1 M 16 D/Male

Bill No : MMH/HM/IPH202400926

Bill Date : 20/04/2024

DOA : 13/4/2024 11:57AM

DOD :

Entity Type : Insurance

Entity Name : CMCHIS INSURANCE

Consultant Name : Dr.RAJESH.V

S.No	Description	Amount
1	BLOOD COMPONENTS	₹ 500.00
2	LABORATORY	₹ 5,912.00
3	PHARMACY CHARGE	₹ 64,841.00
4	RADIOLOGY	₹ 5,200.00
5	SURGICAL PACKAGE-HEART	₹ 21,047.00
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_2257561101968-1	97,500.00