

IN PATIENT SUMMARY BILL

UHID : MHI202483234

IP No : IPH2024000965

Patient name : Mr.RAMANATHAN KARUPAIYA (CM SCF

Age : 63 Y 8 M 2 D/Male

Bill No : MMH/HM/IPH202401007

Bill Date : 29/04/2024

DOA : 22/4/2024 12:45PM

DOD :

Entity Type : Insurance

Entity Name : CMCHIS INSURANCE

Consultant Name : Dr.ANBARASU MOHANRAJ

S.No	Description	Amount
1	BLOOD COMPONENTS	₹ 500.00
2	LABORATORY	₹ 10,695.00
3	PHARMACY CHARGE	₹ 64,665.00
4	RADIOLOGY	₹ 12,360.00
5	SURGICAL PACKAGE-HEART	₹ 9,280.00
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	13_H225761272336-1	97,500.00