IN PATIENT SUMMARY BILL

UHID	:	MHI202483330	Bill No	:	MMH/HM/IPH202400900
IP No	:	IPH2024000911	Bill Date	:	17/04/2024
Patient name	:	Mrs.JAYALAKSHMI.N(ESI)	DOA	:	16/4/2024 9:27AM
Age	:	49 Y 4 M 27 D/Female	DOD	:	
			Entity Type	:	Corporate
			Entity Name	:	ESI
Consultant Name	:	Dr.K.JAISHANKAR			

S.No	Description		Amount
1	CARDIOLOGY PACKAGE-HEART	₹	68,078.00
2	IMPLANT	₹	40,178.00
3	LABORATORY	₹	973.00
4	PHARMACY CHARGE	₹	12,949.00
5	RADIOLOGY	₹	800.00
	Gross Amount	₹	**122,978.00**
	Sanction Amount	₹	**122,978.00**
	Net Payable	₹	**122,978.00**
	Received Amount	₹	**0.00**

Received Amount in Words : Zero Only

PRAVEEN
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1					

Medical Claim	Claim No	Sanction Amount
ESI	5936403	122,978.00