## IN PATIENT SUMMARY BILL

: MMH/HM/IPH202400977 UHID : MHI202483580 Bill No

: 25/04/2024 : IPH2024000997 Bill Date IP No

Patient name : Mrs.CHRISTELMARY : 25/4/2024 10:49AM DOA

: 58 Y 0 M 25 D/Female DOD Age

Entity Type : Corporate Entity Name : CHENNAL I

: CHENNAI PORT TRUST

Consultant Name · Dr.K.JAISHANKAR

S.No	Description			Amount
1	CARDIOLOGY PACKAGE-HEART		₹	6,516.00
2	PHARMACY CHARGE		₹	5,387.00
		Gross Amount	₹	11,903.00
		Sanction Amount	₹	11,903.00
		Net Payable	₹	11,903.00
		Received Amount	₹	0.00

AKASH **Received Amount in Words** : Zero Only

**Authorised Signature** 

## **Payment History**

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

Medical Claim	Claim No	Sanction Amount
CHENNAI PORT TRUST	10033152	11,903.00