## IN PATIENT SUMMARY BILL

| | | | | | |
|---|---|---|---|---|---|
| UHID | : | MMH202476423 | Bill No | : | MMH/MH/IP202401133 |
| IP No | : | IP2024001018 | Bill Date | : | 26/05/2024 |
| Patient name | : | Mr.RANJAN.D | DOA | : | 3/5/2024 1:30AM |
| Age | : | 67 Y 3 M 5 D/Male | DOD | : | |
| | | | Entity Type | : | Insurance |
| | | | Entity Name | : | THE NEW INDIA ASSURANCE CO. LTD |
| Consultant Name | : | Dr.T.PALANIAPPAN | | | |

| S.No | Description | | Amount |
|---|---|---|---|
| 1 | ADMINISTRATION CHARGES | ₹ | 350.00 |
| 2 | BED CHARGES | ₹ | 133,500.00 |
| 3 | DIET CHARGES | ₹ | 8,500.00 |
| 4 | DUTY MEDICAL OFFICER CHARGE | ₹ | 3,750.00 |
| 5 | EQUIPMENT | ₹ | 257,850.00 |
| 6 | GENERAL PROCEDURE | ₹ | 8,000.00 |
| 7 | INJECTION CHARGES | ₹ | 200.00 |
| 8 | INTENSIVIST CHARGES | ₹ | 45,000.00 |
| 9 | LABORATORY | ₹ | 125,784.00 |
| 10 | NURSING CHARGE | ₹ | 40,000.00 |
| 11 | OTHER ADDITION | ₹ | 51,437.00 |
| 12 | PHARMACY CHARGE | ₹ | 573,313.00 |
| 13 | PHYSIOTHERAPY | ₹ | 23,500.00 |
| 14 | PROFESSIONAL TEAM FEES | ₹ | 59,450.00 |
| 15 | RADIOLOGY | ₹ | 46,052.00 |

| | | |
|---|---|---|
| **Gross Amount** | ₹ | **1,376,686.00** |
| **Sanction Amount** | ₹ | **538,080.00** |
| **Net Payable** | ₹ | **1,376,686.00** |
| **Advance Amount** | ₹ | **830,000.00** |
| **Received Amount** | ₹ | **8,606.00** |

**Received Amount in Words** : Eight Lakh Thirty-Eight Thousand Six Hundred Six Only

SATHISH KUMAR.S
**Authorised Signature**

**Payment History**

| S.No | Receipt Date | Receipt Code | Payment Mode | Trans. Type | Received Amount |
|---|---|---|---|---|---|
| 1 | 03/05/2024 | MMH/MH/RECH2024016 | CASH | Advance Amount | 30,000.00 |
| 2 | 25/05/2024 | MMH/MH/RECH2024019 | UPI | Advance Amount | 90,000.00 |
| 3 | 25/05/2024 | MMH/MH/RECH2024019 | CASH | Advance Amount | 215,000.00 |
| 4 | 25/05/2024 | MMH/MH/RECH2024019 | NEFT | Advance Amount | 300,000.00 |
| 5 | 25/05/2024 | MMH/MH/RECH2024019 | NEFT | Advance Amount | 100,000.00 |
| 6 | 25/05/2024 | MMH/MH/RECH2024019 | NEFT | Advance Amount | 95,000.00 |
| 7 | 26/05/2024 | MMH/MH/REDH2024112 | CHEQUE | Collected Amount | 8,606.00 |

| S.No | Description | Amount |
|---|---|---|

| Medical Claim | Claim No | Sanction Amount |
|---|---|---|
| THE NEW INDIA ASSURANCE CO. LTD | 37752193 | 538,080.00 |