

IN PATIENT SUMMARY BILL

UHID	: MMH202477084	Bill No	: MMH/MH/IP202401107
IP No	: IP2024001129	Bill Date	: 23/05/2024
Patient name	: Mr.INPHAC KUMARAN L P	DOA	: 18/5/2024 9:56PM
Age	: 17 Y 7 M 24 D/Male	DOD	:
		Entity Type	: Insurance
		Entity Name	: THE NEW INDIA ASSURANCE CO.
Consultant Name	: Dr.SRIRAM THANIGAI	TPA	: GOOD HEALTH TPA

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 12,600.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 2,250.00
4	EQUIPMENT	₹ 5,000.00
5	INJECTION CHARGES	₹ 680.00
6	LABORATORY	₹ 9,475.00
7	NURSING CHARGE	₹ 2,400.00
8	OPERATION THEATRE CHARGES	₹ 13,850.00
9	OTHER ADDITION	₹ 10,555.00
10	PHARMACY CHARGE	₹ 70,873.00
11	PHYSIOTHERAPY	₹ 1,800.00
12	PROFESSIONAL TEAM FEES	₹ 108,570.00
13	RADIOLOGY	₹ 2,280.00
Gross Amount		₹ 240,683.00
Sanction Amount		₹ 230,683.00
Net Payable		₹ 240,683.00
Advance Amount		₹ 10,000.00
Received Amount		₹ 0.00

Received Amount in Words : Ten Thousand Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	18/05/2024	MMH/MH/RECH2024018	UPI	Advance Amount	10,000.00

Medical Claim	Claim No	Sanction Amount
THE NEW INDIA ASSURANCE CO. LTD	1217644	230,683.00