

IN PATIENT SUMMARY BILL

UHID	:	MMH202477597	Bill No	:	MMH/MH/IP202401215
IP No	:	IP2024001268	Bill Date	:	07/06/2024
Patient name	:	Ms.SRI LAXMI S	DOA	:	5/6/2024 10:52AM
Age	:	20 Y 0 M 24 D/Female	DOD	:	
			Entity Type	:	Insurance
			Entity Name	:	HDFC ERGO GENERAL INSURANCE
Consultant Name	:	Dr.VIGNESHWARAN P	TPA	:	HDFC ERGO GENERAL INSURANCE

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 1,650.00
3	DIET CHARGES	₹ 500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 1,125.00
5	EQUIPMENT	₹ 5,000.00
6	LABORATORY	₹ 151.00
7	NURSING CHARGE	₹ 1,200.00
8	OPERATION THEATRE CHARGES	₹ 7,850.00
9	OTHER ADDITION	₹ 8,247.00
10	PHARMACY CHARGE	₹ 103,153.00
11	PROFESSIONAL TEAM FEES	₹ 45,100.00
12	RADIOLOGY	₹ 756.00

Gross Amount	₹	175,082.00
Sanction Amount	₹	175,082.00
Net Payable	₹	175,082.00
Advance Amount	₹	3,000.00
Received Amount	₹	0.00
Refund Amount	₹	3,000.00

Received Amount in Words : Three Thousand Only

SATHISH KUMAR.S  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/5/2024	MMH/MH/RECH202402072	CARD	Advance Amount	3,000.00

Medical Claim	Claim No	Sanction Amount
HDFC ERGO GENERAL INSURANCE	RC-hs24-14256238	175,082.00