

IN PATIENT SUMMARY BILL

UHID : MMH202478296

IP No : IP2024001775

Patient name : Mrs.ELIZABETH CHRISTO

Age : 65 Y 11 M 1 D/Female

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401930

Bill Date : 09/09/2024

DOA : 8/8/2024 3:00AM

DOD :

Entity Type : Insurance

Entity Name : NIVA BUPA

TPA : NIVA BUPA

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 82,500.00
3	DIET CHARGES	₹ 500.00
4	EQUIPMENT	₹ 71,050.00
5	GENERAL PROCEEDURE	₹ 4,000.00
6	INTENSIVIST CHARGES	₹ 33,000.00
7	LABORATORY	₹ 76,640.00
8	NURSING CHARGE	₹ 22,000.00
9	PHARMACY CHARGE	₹ 195,359.00
10	PHYSIOTHERAPY	₹ 23,300.00
11	PROFESSIONAL TEAM FEES	₹ 27,900.00
12	RADIOLOGY	₹ 43,260.00
Gross Amount		₹ 579,859.00
Sanction Amount		₹ 549,859.00
Net Payable		₹ 579,859.00
Advance Amount		₹ 30,000.00
Received Amount		₹ 0.00

Received Amount in Words : Thirty Thousand Only

SUDHA
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	8/8/2024	MMH/MH/RECH202403043	CARD	Advance Amount	30,000.00

Medical Claim	Claim No	Sanction Amount
NIVA BUPA	945065	549,859.00