

IN PATIENT SUMMARY BILL

UHID	: MMH202478429	Bill No	: MMH/MH/IP202401390
IP No	: IP2024001402	Bill Date	: 29/06/2024
Patient name	: Mr.RAMACHANDRAN K S	DOA	: 22/6/2024 2:07PM
Age	: 74 Y 4 M 28 D/Male	DOD	:
		Entity Type	: Insurance
		Entity Name	: SBI GENREAL INSURANCE
Consultant Name	: Dr.T.PALANIAPPAN	TPA	: VIDAL HEALTH INSURANCE TPA PRIVATE LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 24,300.00
3	DIET CHARGES	₹ 3,000.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,000.00
5	EQUIPMENT	₹ 1,000.00
6	INTENSIVIST CHARGES	₹ 3,000.00
7	LABORATORY	₹ 22,038.00
8	NURSING CHARGE	₹ 5,200.00
9	OTHER ADDITION	₹ 14,378.00
10	PHARMACY CHARGE	₹ 32,687.00
11	PHYSIOTHERAPY	₹ 1,000.00
12	PROFESSIONAL TEAM FEES	₹ 17,050.00
13	RADIOLOGY	₹ 38,960.00
Gross Amount		₹ 165,963.00
Sanction Amount		₹ 151,463.00
Net Payable		₹ 165,963.00
Advance Amount		₹ 14,500.00
Received Amount		₹ 0.00

Received Amount in Words : Fourteen Thousand Five Hundred Only

SRINIVASAN  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/22/2024	MMH/MH/RECH202402311	CARD	Advance Amount	10,000.00
2	6/27/2024	MMH/MH/RECH202402385	CARD	Advance Amount	4,500.00

Medical Claim	Claim No	Sanction Amount
SBI GENREAL INSURANCE	CHE-0624-PA-0002652	151,463.00