IN PATIENT SUMMARY BILL

UHID : MHP202400896 Bill No : MMH/MH/IP202402104

IP No : IP2024002166 Bill Date : 30/09/2024

Patient name : Mrs.KANYAKUMARI BASKARAN DOA : 28/9/2024 8:17AM

Age : 64 Y 7 M 8 D/Female DOD

Entity Type : Insurance

Entity Name : THE ORIENTAL INSURANCE

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	4,950.00
3	DUTY MEDICAL OFFICER CHARGE		₹	750.00
4	LABORATORY		₹	173.00
5	NURSING CHARGE		₹	800.00
6	OTHER ADDITION		₹	18,050.00
7	PHARMACY CHARGE		₹	160,090.00
8	PROFESSIONAL TEAM FEES		₹	23,100.00
		Gross Amount	₹	208,263.00
		Sanction Amount	₹	170,765.00
		Net Payable	₹	208,263.00
		Advance Amount	₹	37,498.00
		Received Amount	₹	0.00

Received Amount in Words : Thirty-Seven Thousand Four Hundred Ninety-Eight Only SUDHA

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/28/2024	MMH/MH/RECH202403808	CARD	Advance Amount	37,498.00

Medical Claim	Claim No	Sanction Amount
THE ORIENTAL INSURANCE	39978688	170,765.00