

IN PATIENT SUMMARY BILL

UHID	:	MMH202478900	Bill No	:	MMH/MH/IP202401451
IP No	:	IP2024001494	Bill Date	:	07/07/2024
Patient name	:	Mr.SRINIVASAN.N	DOA	:	5/7/2024 7:00AM
Age	:	42 Y 7 M 19 D/Male	DOD	:	
			Entity Type	:	Insurance
			Entity Name	:	SBI GENREAL INSURANCE
Consultant Name	:	Dr.RENGAN.R.S	TPA	:	VIDAL HEALTH INSURANCE TPA PRIVATE LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 4,125.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,125.00
4	GENERAL PROCEDURE	₹ 1,000.00
5	INJECTION CHARGES	₹ 200.00
6	LABORATORY	₹ 4,230.00
7	NURSING CHARGE	₹ 1,200.00
8	OPERATION THEATRE CHARGES	₹ 9,850.00
9	OTHER ADDITION	₹ 3,200.00
10	PHARMACY CHARGE	₹ 8,423.00
11	PROFESSIONAL TEAM FEES	₹ 77,000.00
Gross Amount		₹ 110,703.00
Sanction Amount		₹ 104,038.00
Net Payable		₹ 110,703.00
Advance Amount		₹ 6,665.00
Received Amount		₹ 0.00

Received Amount in Words : Six Thousand Six Hundred Sixty-Five Only

KARTHICK.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/5/2024	MMH/MH/RECH202402507	CARD	Advance Amount	5,000.00
2	7/6/2024	MMH/MH/RECH202402536	CARD	Advance Amount	1,665.00

Medical Claim	Claim No	Sanction Amount
SBI GENREAL INSURANCE	CHE-0724-PA-0000698	104,038.00