

IN PATIENT SUMMARY BILL

UHID : MMH202479260

IP No : IP2024001581

Patient name : Mrs.NANDHINI.N

Age : 31 Y 4 M 11 D/Female

Consultant Name : Dr.VIJAY ALAGAPPAN S

Bill No : MMH/MH/IP202401595

Bill Date : 25/07/2024

DOA : 14/7/2024 6:09PM

DOD :

Entity Type : Insurance

Entity Name : IFFCO TOKIYO GENERAL

TPA : IFFCO HEALTH PLAN TPA PVT LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 27,800.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 6,000.00
4	LABORATORY	₹ 36,353.00
5	NURSING CHARGE	₹ 6,400.00
6	OTHER ADDITION	₹ 13,003.00
7	PHARMACY CHARGE	₹ 21,882.00
8	PROFESSIONAL TEAM FEES	₹ 26,400.00
9	RADIOLOGY	₹ 5,400.00
Gross Amount		₹ 143,588.00
Sanction Amount		₹ 142,595.00
Net Payable		₹ 143,588.00
Advance Amount		₹ 3,000.00
Received Amount		₹ 1,391.00
Refund Amount		₹ 3,398.00

Received Amount in Words : Four Thousand Three Hundred Ninety-One Only

SUDHA.M
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/14/2024	MMH/MH/RECH202402647	CARD	Advance Amount	3,000.00
2	7/25/2024	MMH/MH/REDH202416233	CHEQUE	Collected Amount	1,391.00

Medical Claim	Claim No	Sanction Amount
IFFCO TOKIYO GENERAL INSURANCE	24071500764	142,595.00