IN PATIENT SUMMARY BILL

UHID : MHP202400969 Bill No : MMH/MH/IP202401562

IP No : IP2024001618 Bill Date : 21/07/2024

Patient name : Mr. VENKATESAN C N DOA : 18/7/2024 5:53PM

Age : 81 Y 10 M 9 D/Male DOD :

Entity Type : Insurance

Entity Name : NATIONAL INSURANCE COMPANY

Consultant Name : Dr.DURAI RAVI TPA : MIDINDIA TPA PVT LTD

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	6,875.00
3	DIET CHARGES		₹	1,500.00
4	DUTY MEDICAL OFFICER CHARGE		₹	1,875.00
5	LABORATORY		₹	20,660.00
6	NURSING CHARGE		₹	2,000.00
7	OTHER ADDITION		₹	2,480.00
8	PHARMACY CHARGE		₹	5,512.00
9	PROFESSIONAL TEAM FEES		₹	8,800.00
10	RADIOLOGY		₹	12,000.00
		Gross Amount	₹	62,052.00
		Sanction Amount	₹	53,062.00
		Net Payable	₹	62,052.00
		Advance Amount	₹	62,050.00
		Received Amount	₹	0.00
		Refund Amount	₹	53,060.00

Received Amount in Words : Sixty-Two Thousand Fifty Only KARTHICK.S

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/20/2024	MMH/MH/RECH202402763	CASH	Advance Amount	62,050.00

Medical Claim	Claim No	Sanction Amount
NATIONAL INSURANCE COMPANY LTD	MD18724614	53,062.00