

IN PATIENT SUMMARY BILL

UHID	:	MMH202479700	Bill No	:	MMH/MH/IP202401648
IP No	:	IP2024001653	Bill Date	:	31/07/2024
Patient name	:	Mr.ASHOK KUMAR A B	DOA	:	23/7/2024 1:38PM
Age	:	68 Y 6 M 29 D/Male	DOD	:	
			Entity Type	:	Insurance
			Entity Name	:	THE ORIENTAL INSURANCE
Consultant Name	:	Dr.T.PALANIAPPAN	TPA	:	RAKSHA TPA

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 7,700.00
3	DIET CHARGES	₹ 4,000.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 5,250.00
5	EQUIPMENT	₹ 2,950.00
6	LABORATORY	₹ 68,898.00
7	NURSING CHARGE	₹ 5,600.00
8	OTHER ADDITION	₹ 11,612.00
9	PHARMACY CHARGE	₹ 25,834.00
10	PROFESSIONAL TEAM FEES	₹ 19,580.00
11	RADIOLOGY	₹ 43,910.00
		₹ 195,684.00
		₹ 195,684.00
		₹ 10,723.00
		₹ 4,261.00
		₹ 4,261.00

Received Amount in Words : Fourteen Thousand Nine Hundred Eighty-Four Only

SUDHA.M

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/23/2024	MMH/MH/RECH202402801	UPI	Advance Amount	5,000.00
2	7/30/2024	MMH/MH/RECH202402910	UPI	Advance Amount	5,723.00