

IN PATIENT SUMMARY BILL

UHID : MMH202480083

IP No : IP2024002016

Patient name : Mr.SUKUMARAN.M

Age : 77 Y 11 M 3 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401991

Bill Date : 18/09/2024

DOA : 10/9/2024 10:00PM

DOD :

Entity Type : Insurance

Entity Name : UNIVERSAL SAMPO GEN INSURANCE

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 27,450.00
3	DIET CHARGES	₹ 3,500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,375.00
5	EQUIPMENT	₹ 10,500.00
6	INTENSIVIST CHARGES	₹ 9,000.00
7	LABORATORY	₹ 36,122.00
8	NURSING CHARGE	₹ 9,600.00
9	OPERATION THEATRE CHARGES	₹ 5,350.00
10	OTHER ADDITION	₹ 19,429.00
11	PHARMACY CHARGE	₹ 55,865.00
12	PHYSIOTHERAPY	₹ 700.00
13	PROCEDURE CHARGES	₹ 2,000.00
14	PROFESSIONAL TEAM FEES	₹ 27,500.00
15	RADIOLOGY	₹ 10,910.00
16	TRANSPORT	₹ 2,500.00
Gross Amount		₹ 224,151.00
Sanction Amount		₹ 176,238.00
Net Payable		₹ 224,151.00
Advance Amount		₹ 80,000.00
Received Amount		₹ 10,000.00
Refund Amount		₹ 42,087.00

Received Amount in Words : Ninety Thousand Only

SUDHA
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/18/2024	MMH/MH/REDH202420583	CHEQUE	Collected Amount	10,000.00
2	9/10/2024	MMH/MH/RECH202403519	CARD	Advance Amount	30,000.00
3	9/13/2024	MMH/MH/RECH202403566	CARD	Advance Amount	50,000.00

Medical Claim	Claim No	Sanction Amount
UNIVERSAL SAMPO GEN INSURANCE	39787450	176,238.00