

IN PATIENT SUMMARY BILL

UHID : MMH202481588

IP No : IP2024002140

Patient name : Mrs.VIDYALAKSHMI G

Age : 47 Y 0 M 9 D/Female

Consultant Name : Dr.ARUN KUMAR.I

Bill No : MMH/MH/IP202402083

Bill Date : 27/09/2024

DOA : 25/9/2024 4:42AM

DOD :

Entity Type : Insurance

Entity Name : STAR HEALTH AND ALLIED INSURANCE

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 6,950.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,500.00
4	EQUIPMENT	₹ 6,000.00
5	LABORATORY	₹ 1,296.00
6	NURSING CHARGE	₹ 1,600.00
7	OPERATION THEATRE CHARGES	₹ 14,850.00
8	OTHER ADDITION	₹ 31,054.00
9	PHARMACY CHARGE	₹ 67,047.00
10	PHYSIOTHERAPY	₹ 600.00
11	PROCEDURE CHARGES	₹ 450.00
12	PROFESSIONAL TEAM FEES	₹ 66,000.00
13	RADIOLOGY	₹ 1,872.00
Gross Amount		₹ 199,569.00
Sanction Amount		₹ 166,528.00
Discount Amount		₹ 30,041.00
Net Payable		₹ 169,528.00
Advance Amount		₹ 3,000.00
Received Amount		₹ 0.00

Received Amount in Words : Three Thousand Only

SUDHA
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/25/2024	MMH/MH/RECH202403741	UPI	Advance Amount	3,000.00