

IN PATIENT SUMMARY BILL

UHID : MMH202481926

IP No : IP2024002161

Patient name : Mrs.MUNIAMMAL V

Age : 55 Y 4 M 29 D/Female

Bill No : MMH/MH/IP202402151

Bill Date : 07/10/2024

DOA : 27/9/2024 3:03PM

DOD :

Entity Type : Insurance

Entity Name : ROYAL SUNDARAM INSURANCE

Consultant Name : Dr.VIJAYAKRISHNAN B

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 23,100.00
3	DIET CHARGES	₹ 3,500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 4,500.00
5	LABORATORY	₹ 8,427.00
6	NURSING CHARGE	₹ 4,800.00
7	OPERATION THEATRE CHARGES	₹ 13,500.00
8	OTHER ADDITION	₹ 66,871.00
9	PHARMACY CHARGE	₹ 93,508.00
10	PHYSIOTHERAPY	₹ 5,400.00
11	PROCEDURE CHARGES	₹ 1,500.00
12	PROFESSIONAL TEAM FEES	₹ 25,000.00
13	RADIOLOGY	₹ 4,280.00
Gross Amount		₹ 254,736.00
Sanction Amount		₹ 175,474.00
Discount Amount		₹ 25,000.00
Net Payable		₹ 229,736.00
Advance Amount		₹ 54,262.00
Received Amount		₹ 0.00

Received Amount in Words : Fifty-Four Thousand Two Hundred Sixty-Two Only

SATHISH KUMAR.S  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/3/2024	MMH/MH/RECH202403887	UPI	Advance Amount	2,262.00
2	10/3/2024	MMH/MH/RECH202403888	UPI	Advance Amount	20,000.00
3	10/3/2024	MMH/MH/RECH202403889	CASH	Advance Amount	32,000.00

Medical Claim	Claim No	Sanction Amount
ROYAL SUNDARAM INSURANCE	CHE-0924-PA-0003568	175,474.00