

### IN PATIENT SUMMARY BILL

UHID : MMH202478406  
 IP No : IP2024001395  
 Patient name : Mrs.RAJESWARI S  
 Age : 43 Y 1 M 14 D/Female  
 Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401400  
 Bill Date : 30/06/2024  
 DOA : 21/6/2024 10:10PM  
 DOD :  
 Entity Type : Insurance  
 Entity Name : FUTURE GENERALI INDIA  
 INSURANCE COMPANY LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 28,500.00
3	CARDIOLOGY PACKAGE-HEART	₹ 16,000.00
4	DIET CHARGES	₹ 2,500.00
5	DUTY MEDICAL OFFICER CHARGE	₹ 3,750.00
6	EQUIPMENT	₹ 2,350.00
7	INTENSIVIST CHARGES	₹ 3,000.00
8	LABORATORY	₹ 52,449.00
9	NURSING CHARGE	₹ 6,000.00
10	OTHER ADDITION	₹ 43,018.00
11	PHARMACY CHARGE	₹ 22,160.00
12	PROFESSIONAL TEAM FEES	₹ 15,950.00
13	RADIOLOGY	₹ 5,630.00
		<b>₹ 201,657.00</b>
		<b>₹ 8,679.00</b>
		<b>₹ 192,978.00</b>
		<b>₹ 0.00</b>

Received Amount in Words : Zero Only

SATHISH KUMAR.S  
Authorised Signature

#### Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1					