

IN PATIENT SUMMARY BILL

UHID : MMH202482246
 IP No : IP2024002193
 Patient name : Mrs.PREMA A
 Age : 65 Y 0 M 7 D/Female
 Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202402164
 Bill Date : 08/10/2024
 DOA : 1/10/2024 11:00PM
 DOD :
 Entity Type : Insurance
 Entity Name : FUTURE GENERALI INDIA
 INSURANCE COMPANY LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 14,850.00
3	DIET CHARGES	₹ 1,500.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 2,250.00
5	LABORATORY	₹ 11,645.00
6	NURSING CHARGE	₹ 2,400.00
7	OTHER ADDITION	₹ 9,204.00
8	PHARMACY CHARGE	₹ 10,136.00
9	PHYSIOTHERAPY	₹ 600.00
10	PROFESSIONAL TEAM FEES	₹ 11,000.00
11	RADIOLOGY	₹ 3,344.00
		₹ 67,279.00
		₹ 63,439.00
		₹ 3,840.00
		₹ 63,439.00
		₹ 0.00

Received Amount in Words : Zero Only

SUDHA
Authorised Signature

Payment History

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