

IN PATIENT SUMMARY BILL

UHID	:	MHC202474585	Bill No	:	MMH/CM/IP202402598
IP No	:	IPC2024002638	Bill Date	:	24/09/2024
Patient name	:	Mr.SARATHKUMAR.M	DOA	:	23/9/2024 3:48PM
Age	:	32 Y 0 M 1 D/Male	DOD	:	
			Entity Type	:	Insurance
			Entity Name	:	BAJAJ ALLIANZ GENERAL
Consultant Name	:	Dr.SANKARLINGAM	TPA	:	BAJAJ ALLIANZ GENERAL INSURANCE

S.No	Description	Amount
1	BED CHARGES	₹ 2,900.00
2	DUTY MEDICAL OFFICER CHARGE	₹ 200.00
3	INFECTION CONTROL	₹ 100.00
4	IP REGISTRATION	₹ 250.00
5	LABORATORY	₹ 3,831.00
6	MEDICAL RECORD CHARGE	₹ 200.00
7	NURSING CHARGE	₹ 150.00
8	OPERATION THEATRE CHARGES	₹ 4,000.00
9	OTHER ADDITION	₹ 1,800.00
10	PHARMACY CHARGE	₹ 4,407.00
11	PROFESSIONAL TEAM FEES	₹ 13,000.00
12	RADIOLOGY	₹ 800.00
Gross Amount		₹ 31,638.00
Sanction Amount		₹ 28,132.00
Discount Amount		₹ 506.00
Net Payable		₹ 31,132.00
Advance Amount		₹ 3,000.00
Received Amount		₹ 0.00

Received Amount in Words : Three Thousand Only

IMANUVEL  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/24/2024	MMH/CM/RECAP202402041	UPI	Advance Amount	3,000.00