

IN PATIENT SUMMARY BILL

UHID	:	MHM202404256	Bill No	:	MMH/MM/IPM202400639
IP No	:	IPM2024000631	Bill Date	:	02/08/2024
Patient name	:	Mrs.FAZILA BEGUM K	DOA	:	29/7/2024 9:45PM
Age	:	32 Y 9 M 28 D/Female	DOD	:	
			Entity Type	:	Insurance
			Entity Name	:	UNITED INDIA INSURANCE CO LTD
Consultant Name	:	Dr.AIYSHA BEEVI	TPA	:	MEDIASSIST INDIA TPA PVT LTD

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 200.00
2	BED CHARGES	₹ 9,000.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 3,000.00
4	EQUIPMENT	₹ 9,150.00
5	IP REGISTRATION	₹ 150.00
6	LABORATORY	₹ 14,904.00
7	MEDICAL RECORD CHARGE	₹ 200.00
8	NURSING CHARGE	₹ 4,000.00
9	OTHER ADDITION	₹ 5,354.00
10	PHARMACY CHARGE	₹ 12,346.00
11	PROFESSIONAL FEES	₹ 5,500.00
12	RADIOLOGY	₹ 480.00

Gross Amount	₹	64,284.00
Discount Amount	₹	1,500.00
Net Payable	₹	62,784.00
Advance Amount	₹	5,000.00
Received Amount	₹	0.00
Refund Amount	₹	1,460.00

Received Amount in Words : Five Thousand Only

BASKAR  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/29/2024	MMH/MM/RECAP202400870	CARD	Advance Amount	5,000.00