IN PATIENT SUMMARY BILL

UHID : MHM202407374 Bill No : MMH/MM/IPM202400966

IP No : IPM2024000929 Bill Date : 16/10/2024

Patient name : Mr.SOMAN PILLAI DOA : 6/10/2024 9:30PM

Age : 70 Y 11 M 11 D/Male DOD

Entity Type : Insurance

Entity Name : THE NEW INDIA INSURANCE

Authorised Signature

Consultant Name : Dr.VAISHNAVI GANESAN TPA : MEDIASSIST INDIA TPA PVT LTD

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	200.00
2	BED CHARGES		₹	45,000.00
3	BLOOD COMPONENTS		₹	98,100.00
4	DUTY MEDICAL OFFICER CHARGE		₹	6,000.00
5	EQUIPMENT		₹	20,500.00
6	INJECTION CHARGES		₹	300.00
7	INTENSIVIST CHARGES		₹	9,000.00
8	IP REGISTRATION		₹	150.00
9	LABORATORY		₹	60,061.00
10	MEDICAL RECORD CHARGE		₹	200.00
11	NURSING CHARGE		₹	14,500.00
12	OPERATION THEATRE CHARGES		₹	6,000.00
13	OTHER ADDITION		₹	34,337.00
14	PHARMACY CHARGE		₹	115,859.00
15	PROCEDURE CHARGES		₹	1,000.00
16	PROFESSIONAL FEES		₹	51,500.00
17	RADIOLOGY		₹	5,180.00
18	TRANSPORT		₹	2,000.00
		Gross Amount	₹	469,887.00
		Sanction Amount	₹	454,320.00
		Discount Amount	₹	10,000.00
		Net Payable	₹	459,887.00
		Advance Amount	₹	10,000.00
		Received Amount	₹	0.00
		Refund Amount	₹	4,433.00
eived Amount in Words : Ten Thousand Only			BASKAR	

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/6/2024	MMH/MM/RECAP202401259	CARD	Advance Amount	10,000.00