

IN PATIENT SUMMARY BILL

UHID : MHI202484483

IP No : IPH2024001634

Patient name : Mr.PANNEERSELVAM K (CM SCHEME)

Age : 57 Y 3 M 3 D/Male

Bill No : MMH/HM/IPH202401686

Bill Date : 23/07/2024

DOA : 13/7/2024 11:00AM

DOD :

Entity Type : Insurance

Entity Name : CMCHIS INSURANCE

Consultant Name : Dr.ANBARASU MOHANRAJ

S.No	Description	Amount
1	BLOOD COMPONENTS	₹ 1,000.00
2	IMPLANT	₹ 29,736.00
3	LABORATORY	₹ 20,236.00
4	PHARMACY CHARGE	₹ 91,731.00
5	RADIOLOGY	₹ 6,396.00
Gross Amount		₹ 149,099.00
Discount Amount		₹ 12,599.00
Net Payable		₹ 136,500.00
Received Amount		₹ 0.00

Received Amount in Words : Zero Only

NITHESHVAR R
Authorised Signature

Payment History

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