

IN PATIENT SUMMARY BILL

UHID : MHI202485628

IP No : IPH2024002189

Patient name : Mrs.SHAKIRA KUTHBUDEEN (CM SCHEMI

Age : 56 Y 10 M 15 D/Female

Bill No : MMH/HM/IPH202402191

Bill Date : 21/09/2024

DOA : 17/9/2024 12:02PM

DOD :

Entity Type : Insurance

Entity Name : CMCHIS INSURANCE

Consultant Name : Dr.RAJESH.V

S.No	Description	Amount
1	BLOOD COMPONENTS	₹ 8,250.00
2	LABORATORY	₹ 32,395.00
3	PHARMACY CHARGE	₹ 63,632.00
4	RADIOLOGY	₹ 1,800.00
Gross Amount		₹ 106,077.00
Sanction Amount		₹ 97,500.00
Discount Amount		₹ 8,577.00
Net Payable		₹ 97,500.00
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					