

IN PATIENT SUMMARY BILL

UHID : MHI202483894 Bill No : MMH/HM/IPH202402280
 IP No : IPH2024002266 Bill Date : 30/09/2024
 Patient name : Mrs.REVATHI THIYAGARAJAN(ESI) DOA : 25/9/2024 11:59AM
 Age : 48 Y 5 M 29 D/Female DOD :
 Entity Type : Corporate
 Entity Name : ESI
 Consultant Name : Dr.KAILASH A JAIN

S.No	Description	Amount
1	BLOOD COMPONENTS	₹ 2,000.00
2	IMPLANT	₹ 88,315.00
3	LABORATORY	₹ 5,518.00
4	PHARMACY CHARGE	₹ 148,427.00
5	RADIOLOGY	₹ 1,955.00
	Gross Amount	₹ 246,215.00
	Sanction Amount	₹ 184,833.00
	Discount Amount	₹ 61,382.00
	Net Payable	₹ 184,833.00
	Received Amount	₹ 0.00

Received Amount in Words : Zero Only

PRAVEEN
Authorised Signature

Payment History

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