

Out Patient Bill

Patient Name	: Mrs.RAJESHWARI R	Bill No	: MMH/MH/IP202400309
Patient Id	: MMH202473424	Bill Date	: 10/02/2024 2:43:49PM
Age/Gender	: 60 Y 10 M 6 D/Female	Visit Report Id	: MMH202473424-IP001
Phone Number	: 9841945340	Payment Mode	:
Doctor Name	: Dr.T.PALANIAPPAN	Entity Type	: Insurance
Visit Date	: 31/01/2024 10:00:53AM	Entity Name	: FUTURE GENERALI INDIA IN
Speciality	: GENERAL PHYSICIAN & DIAE		
Claim No	: 13-FGH-23-3-454202-01		

S.No	Description	Qty	Unit Rate	Discount	Amount
1	HbA1c	1.00	₹1,126.00	₹0.00	₹1,126.00
2	POTASSIUM (k +)	1.00	₹376.00	₹0.00	₹376.00
3	CBG. (Capillary Blood Glucose)	7.00	₹180.00	₹0.00	₹1,260.00
4	CBG. (Capillary Blood Glucose)	7.00	₹180.00	₹0.00	₹1,260.00
5	MONITOR CHARGE 1 DAY	2.00	₹1,000.00	₹0.00	₹2,000.00
6	SYRINGE PUMP CHARGE	2.00	₹1,000.00	₹0.00	₹2,000.00
7	TOTAL WBC COUNT	1.00	₹180.00	₹0.00	₹180.00
8	PHYSIOTHERAPHY CHARGES	1.00	₹700.00	₹0.00	₹700.00
9	CREATININE	1.00	₹300.00	₹0.00	₹300.00
10	CATHETERIZATION CHARGES	1.00	₹500.00	₹0.00	₹500.00
11	CYSTOSCOPY INSTRUMENT	1.00	₹3,000.00	₹0.00	₹3,000.00
12	CATHETERIZATION CHARGES	1.00	₹500.00	₹0.00	₹500.00

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S.No	Description	Qty	Unit Rate	Discount	Amount
13	KUB SCAN	1.00	₹1,800.00	₹0.00	₹1,800.00
14	FENTANYL	1.00	₹200.00	₹0.00	₹200.00
15	CBG. (Capillary Blood Glucose)	7.00	₹180.00	₹0.00	₹1,260.00
16	SEROLOGY (HIV / HBSAG / HCV) CARD	1.00	₹3,600.00	₹0.00	₹3,600.00
17	OT 3 CHARGES	1.00	₹5,000.00	₹0.00	₹5,000.00
18	SEVOFLOURANE	0.50	₹2,500.00	₹0.00	₹1,250.00
19	CREATININE	1.00	₹264.00	₹0.00	₹264.00
20	DIETICIAN FEES - IP	1.00	₹500.00	₹0.00	₹500.00
21	CBG. (Capillary Blood Glucose)	3.00	₹158.00	₹0.00	₹474.00
22	TOTAL WBC COUNT	1.00	₹158.00	₹0.00	₹158.00
23	URINE ROUTINE ANALYSIS	1.00	₹238.00	₹0.00	₹238.00
24	CBG. (Capillary Blood Glucose)	6.00	₹158.00	₹0.00	₹948.00

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25	PROFESSIONAL FEES(Dr.SATHISH BABU)	1.00	₹4,400.00	₹0.00	₹4,400.00
26	PROFESSIONAL FEES(Dr.T.PALANIAPPAN)	1.00	₹5,500.00	₹0.00	₹5,500.00
27	Post OP Ward	12.00	₹500.00	₹0.00	₹6,000.00
28	NURSING CHARGE - TWIN SHARING	.00 days	₹800.00	₹0.00	₹4,000.00
29	PHARMACY CHARGE	1.00	₹36,646.00	₹0.00	₹36,646.00
30	PROFESSIONAL FEES(Dr.SURESH KUMAR)	1.00	₹2,500.00	₹0.00	₹2,500.00
31	BED CHARGES - TWIN SHARING	.00 days	₹2,750.00	₹0.00	₹13,750.00
32	PROFESSIONAL FEES(Dr.YUVARAJ K)	1.00	₹11,000.00	₹0.00	₹11,000.00
33	DMO CHARGE - TWIN SHARING	.00 days	₹750.00	₹0.00	₹3,750.00
34	OTHER ADDITION	1.00	₹48,690.00	₹0.00	₹48,690.00

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35	CBC	1.00	₹976.00	₹0.00	₹976.00
36	ADMINISTRATION CHARGES	1.00	₹350.00	₹0.00	₹350.00
37	ABG BLOOD GAS	1.00	₹1,080.00	₹0.00	₹1,080.00
38	TSH 3rd Generation (hs TSH)	1.00	₹1,080.00	₹0.00	₹1,080.00
39	SERUM KETONES (β-Hydroxybutyrate)	1.00	₹900.00	₹0.00	₹900.00
40	LIVER FUNCTION TEST	1.00	₹1,200.00	₹0.00	₹1,200.00
41	PROCALCITONIN-PCT	1.00	₹3,600.00	₹0.00	₹3,600.00
42	T4 (TOTAL)	1.00	₹450.00	₹0.00	₹450.00
43	URINE ROUTINE ANALYSIS	1.00	₹270.00	₹0.00	₹270.00
44	ECG (ELECTROCARDIOGRAM) (IP)	1.00	₹480.00	₹0.00	₹480.00
45	CT ABDOMEN - IP	1.00	₹7,200.00	₹0.00	₹7,200.00
46	ECHO - (IP)	1.00	₹2,000.00	₹0.00	₹2,000.00

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47	RENAL FUNCTION TEST	1.00	₹2,206.00	₹0.00	₹2,206.00
48	URINE CULTURE & SENSITIVITY	1.00	₹1,350.00	₹0.00	₹1,350.00
49	Chest X-Ray	1.00	₹750.00	₹0.00	₹750.00
50	T3 (TOTAL)	1.00	₹450.00	₹0.00	₹450.00
		Total Amount	:		₹189,472.00
		Discount Amount	:		₹11,274.00
		Net Amount	:		₹ 178,198.00
		Amount Received	:		₹ 0.00

Received Amount : Zero Only
in Words

DINESH
Authorised Signature