Out Patient Bill

Patient Name	: **Mr.MUTHU**	**Bill No**	: MMH/MH/DG202400562
Patient Id	: **MH13451**	**Bill Date**	: 29/02/2024 4:47:41PM
Age/Gender	: 64/Male	**Visit Report Id**	: MH13451-V003
Phone Number	: 9840062539	**Payment Mode**	:
Doctor Name	: Dr.T.PALANIAPPAN	**Entity Type**	: CASH
Visit Date	: 29/02/2024 4:44:33PM	**Entity Name**	: CASH
Speciality	: GENERAL PHYSICIAN & DIAE		

S.No	Description	Qty	Unit Rate	Discount	Amount
1	URINE ROUTINE ANALYSIS	1.00	₹180.00	₹0.00	₹180.00
2	RENAL FUNCTION TEST	1.00	₹1,400.00	₹0.00	₹1,400.00
3	GLUCOSE (PP 2 HOURS)	1.00	₹150.00	₹0.00	₹150.00
4	TSH 3RD GENERATION (HS TSH)	1.00	₹720.00	₹0.00	₹720.00
5	HBA1C	1.00	₹750.00	₹0.00	₹750.00
6	LIPID PROFILE	1.00	₹750.00	₹0.00	₹750.00
7	CBC	1.00	₹650.00	₹0.00	₹650.00
8	GLUCOSE (FASTING)	1.00	₹150.00	₹0.00	₹150.00
9	MICROALBUMINURIA - SPOT	1.00	₹780.00	₹0.00	₹780.00

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Speciality	: GENERAL PHYSICIAN & DIAE		

S.No	Description	Qty	Unit Rate	Discount	Amount
		Total Amount	:		**₹5,530.00**
		Discount Amount	:		**₹1,380.00**
		Net Amount	:		**₹ 4,150.00**
		Amount Received	:		**₹ 0.00**
		Due Amount	:		**₹ 4,150.00**

Received Amount in Words : **Zero Only**

SUGUNA

Authorised Signature