

Out Patient Bill

Patient Name	: Mr.KOLLAPURI A	Bill No	: MMH/MH/IP202400548
Patient Id	: MMH202371401	Bill Date	: 13/03/2024 12:03:46PM
Age/Gender	: 65 Y 3 M 15 D/Male	Visit Report Id	: MMH202371401-IP001
Phone Number	: 9952230770	Payment Mode	:
Doctor Name	: Dr.T.PALANIAPPAN	Entity Type	: Insurance
Visit Date	: 03/03/2024 8:10:14PM	Entity Name	: FUTURE GENERALI INDIA IN
Speciality	: GENERAL PHYSICIAN & DIAE		

S.No	Description	Qty	Unit Rate	Discount	Amount
1	ADMINISTRATION CHARGES	1.00	₹350.00	₹0.00	₹350.00
2	PROTHROMBIN TIME	1.00	₹396.00	₹0.00	₹396.00
3	LIVER FUNCTION TEST	1.00	₹1,056.00	₹0.00	₹1,056.00
4	CBC	1.00	₹858.00	₹0.00	₹858.00
5	BLEEDING TIME	1.00	₹158.00	₹0.00	₹158.00
6	ECHO - (IP)	1.00	₹2,000.00	₹0.00	₹2,000.00
7	CBG. (CAPILLARY BLOOD GLUCOSE)	1.00	₹158.00	₹0.00	₹158.00
8	ECG (ELECTROCARDIOGRAM) (IP)	1.00	₹480.00	₹0.00	₹480.00
9	ABDOMEN ERECT	1.00	₹528.00	₹0.00	₹528.00
10	SEROLOGY(HIV/HBSAG/HCV)ELISA	1.00	₹4,435.00	₹0.00	₹4,435.00
11	BLOOD GROUP AND RH TYPE	1.00	₹238.00	₹0.00	₹238.00

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12	URINE CULTURE & SENSITIVITY	1.00	₹1,188.00	₹0.00	₹1,188.00
13	URINE ROUTINE ANALYSIS	1.00	₹238.00	₹0.00	₹238.00
14	CLOTTING TIME	1.00	₹158.00	₹0.00	₹158.00
15	CT ABDOMEN - IP	1.00	₹7,200.00	₹0.00	₹7,200.00
16	RENAL FUNCTION TEST	1.00	₹1,940.00	₹0.00	₹1,940.00
17	HBA1C	1.00	₹990.00	₹0.00	₹990.00
18	CONTRAST STUDY	1.00	₹2,400.00	₹0.00	₹2,400.00
19	TSH 3RD GENERATION (HS TSH)	1.00	₹950.00	₹0.00	₹950.00
20	CREATININE	1.00	₹264.00	₹0.00	₹264.00
21	LAPROSCOPIC INSTRUMENT	1.00	₹10,000.00	₹0.00	₹10,000.00
22	OT 1 CHARGES	1.50	₹7,000.00	₹0.00	₹10,500.00
23	DIATHERMY CHARGES	1.00	₹350.00	₹0.00	₹350.00
24	DRESSING CHARGES	1.00	₹450.00	₹0.00	₹450.00

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25	SEVOFLOURANE	1.00	₹2,500.00	₹0.00	₹2,500.00
26	FENTANYL	1.00	₹200.00	₹0.00	₹200.00
27	NEBULIZER CHARGE	2.00	₹150.00	₹0.00	₹300.00
28	NEBULIZER CHARGE	3.00	₹150.00	₹0.00	₹450.00
29	NEBULIZER CHARGE	3.00	₹150.00	₹0.00	₹450.00
30	USG ABDOMEN (IP)	1.00	₹2,400.00	₹0.00	₹2,400.00
31	DIET CHARGES	1.00	₹470.00	₹0.00	₹470.00
32	DIETICIAN FEES - IP	1.00	₹500.00	₹0.00	₹500.00
33	NEBULIZER CHARGE	2.00	₹150.00	₹0.00	₹300.00
34	PROFESSIONAL FEES(Dr.T.PALANIAPPAN)	1.00	₹22,000.00	₹0.00	₹22,000.00
35	NURSING CHARGE - TWIN SHARING	.00 days	₹800.00	₹0.00	₹4,800.00

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36	PROFESSIONAL FEES(Dr.SENTHIL KUMAR P)	1.00	₹33,000.00	₹0.00	₹33,000.00
37	PROFESSIONAL FEES(Dr.SATHISH BABU)	1.00	₹5,500.00	₹0.00	₹5,500.00
38	DMO CHARGE - TWIN SHARING	.00 days	₹750.00	₹0.00	₹4,500.00
39	PROFESSIONAL FEES(Dr.Dr.K.JAISHANKAR)	1.00	₹1,100.00	₹0.00	₹1,100.00
40	PHARMACY CHARGE	1.00	₹34,796.00	₹0.00	₹34,796.00
41	PROFESSIONAL FEES(Dr.MEDWAY HOSPITAL)	1.00	₹2,200.00	₹0.00	₹2,200.00
42	PROFESSIONAL FEES(Dr.YUVARAJ K)	1.00	₹1,100.00	₹0.00	₹1,100.00
43	BED CHARGES - TWIN SHARING ROOM	.00 days	₹2,750.00	₹0.00	₹16,500.00
44	OTHER ADDITION	1.00	₹114,749.00	₹0.00	₹114,749.0

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45	PROFESSIONAL FEES(Dr.SURENDAR P B)	1.00	₹1,100.00	₹0.00	₹1,100.00
		Total Amount	:		₹296,200.00
		Discount Amount	:		₹10,228.00
		Net Amount	:		₹ 285,972.00
		Amount Received	:		₹ 0.00

Received Amount : Zero Only
in Words

KARTHIK C
Authorised Signature