Out Patient Bill

Patient Name	: **Mrs.SAROJA.R**	**Bill No**	: MMH/MH/IP202400664
Patient Id	: **MMH202474949**	**Bill Date**	: 29/03/2024 6:20:34PM
Age/Gender	: 63 Y 4 M 7 D/Female	**Visit Report Id**	: MMH202474949-IP001
Phone Number	: 7904236351	**Payment Mode**	:
Doctor Name	: Dr.T.PALANIAPPAN	**Entity Type**	: Insurance
Visit Date	: 19/03/2024 6:06:27AM	**Entity Name**	: ROYAL SUNDARAM INSURAN
Speciality	: GENERAL PHYSICIAN & DIAE	**TPA**	: VIDAL HEALTH INSURANCE T

S.No	Description	Qty	Unit Rate	Discount	Amount
1	INTUBATION PROCEDURE	1.00	₹2,500.00	₹0.00	₹2,500.00
2	CBC	1.00	₹976.00	₹0.00	₹976.00
3	ECG (ELECTROCARDIOGRAM) (IP)	1.00	₹480.00	₹0.00	₹480.00
4	CATHETERIZATION CHARGES	1.00	₹500.00	₹0.00	₹500.00
5	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹180.00	₹0.00	₹540.00
6	CT BRAIN - IP	1.00	₹3,600.00	₹0.00	₹3,600.00
7	OXYGEN CHARGE 1 DAY	5.50	₹3,000.00	₹0.00	₹16,500.00
8	SYRINGE PUMP CHARGE	3.00	₹1,000.00	₹0.00	₹3,000.00
9	RYLES TUBE INSERTION	1.00	₹500.00	₹0.00	₹500.00
10	URINE ROUTINE ANALYSIS	1.00	₹270.00	₹0.00	₹270.00
11	ABG BLOOD GAS	1.00	₹1,080.00	₹0.00	₹1,080.00
12	MONITOR CHARGE 1 DAY	6.50	₹1,000.00	₹0.00	₹6,500.00

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Phone Number	: 7904236351	**Payment Mode**	:
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Visit Date	: 19/03/2024 6:06:27AM	**Entity Name**	: ROYAL SUNDARAM INSURAN
Speciality	: GENERAL PHYSICIAN & DIAE	**TPA**	: VIDAL HEALTH INSURANCE T

S.No	Description	Qty	Unit Rate	Discount	Amount
13	SCD CHARGE (DVT)	4.00	₹1,500.00	₹0.00	₹6,000.00
14	MRI BRAIN WITH ANGIOGRAM AND VENOGRAM	1.00	₹22,200.00	₹0.00	₹22,200.00
15	FENTANYL	10.00	₹200.00	₹0.00	₹2,000.00
16	ECHO - (IP)	1.00	₹2,000.00	₹0.00	₹2,000.00
17	CHEST X-RAY - BEDSIDE	1.00	₹900.00	₹0.00	₹900.00
18	LIVER FUNCTION TEST	1.00	₹1,200.00	₹0.00	₹1,200.00
19	RENAL FUNCTION TEST	1.00	₹2,206.00	₹0.00	₹2,206.00
20	CONTRAST STUDY	1.00	₹2,400.00	₹0.00	₹2,400.00
21	ADMINISTRATION CHARGES	1.00	₹350.00	₹0.00	₹350.00
22	HBA1C	1.00	₹1,126.00	₹0.00	₹1,126.00
23	SODIUM (NA +)	1.00	₹376.00	₹0.00	₹376.00
24	SERUM KETONES (ß-HYDROXYBUTYRATE)	1.00	₹900.00	₹0.00	₹900.00
25	PHYSIOTHERAPHY CHARGES	1.00	₹700.00	₹0.00	₹700.00

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Phone Number	: 7904236351	**Payment Mode**	:
Doctor Name	: Dr.T.PALANIAPPAN	**Entity Type**	: Insurance
Visit Date	: 19/03/2024 6:06:27AM	**Entity Name**	: ROYAL SUNDARAM INSURAN
Speciality	: GENERAL PHYSICIAN & DIAE	**TPA**	: VIDAL HEALTH INSURANCE T

S.No	Description	Qty	Unit Rate	Discount	Amount
26	POTASSIUM (K +)	1.00	₹376.00	₹0.00	₹376.00
27	FENTANYL	10.00	₹200.00	₹0.00	₹2,000.00
28	T3 (FREE)	1.00	₹630.00	₹0.00	₹630.00
29	LIPID PROFILE	1.00	₹1,126.00	₹0.00	₹1,126.00
30	TOTAL WBC COUNT	1.00	₹180.00	₹0.00	₹180.00
31	CBG. (CAPILLARY BLOOD GLUCOSE)	6.00	₹180.00	₹0.00	₹1,080.00
32	ALPHA BED	4.00	₹400.00	₹0.00	₹1,600.00
33	TSH 3RD GENERATION (HS TSH)	1.00	₹1,080.00	₹0.00	₹1,080.00
34	CREATININE	1.00	₹300.00	₹0.00	₹300.00
35	HAEMOGLOBIN	1.00	₹300.00	₹0.00	₹300.00
36	ABG BLOOD GAS	1.00	₹1,080.00	₹0.00	₹1,080.00
37	UREA	1.00	₹300.00	₹0.00	₹300.00
38	T4 (FREE)	1.00	₹756.00	₹0.00	₹756.00

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Phone Number	: 7904236351	**Payment Mode**	:
Doctor Name	: Dr.T.PALANIAPPAN	**Entity Type**	: Insurance
Visit Date	: 19/03/2024 6:06:27AM	**Entity Name**	: ROYAL SUNDARAM INSURAN
Speciality	: GENERAL PHYSICIAN & DIAE	**TPA**	: VIDAL HEALTH INSURANCE T

S.No	Description	Qty	Unit Rate	Discount	Amount
39	CT SCREENING - SINGLE PART	1.00	₹2,400.00	₹0.00	₹2,400.00
40	VENTILATOR CHARGE 1 DAY	4.00	₹10,000.00	₹0.00	₹40,000.00
41	SODIUM (NA +)	1.00	₹376.00	₹0.00	₹376.00
42	PLATELET COUNT	1.00	₹450.00	₹0.00	₹450.00
43	POTASSIUM (K +)	1.00	₹376.00	₹0.00	₹376.00
44	TOTAL WBC COUNT	1.00	₹180.00	₹0.00	₹180.00
45	CULTURE & SENSITIVITY	1.00	₹1,050.00	₹0.00	₹1,050.00
46	PHYSIOTHERAPHY CHARGES	2.00	₹700.00	₹0.00	₹1,400.00
47	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹180.00	₹0.00	₹540.00
48	ABG BLOOD GAS	1.00	₹1,080.00	₹0.00	₹1,080.00
49	CHEST X-RAY - BEDSIDE	1.00	₹900.00	₹0.00	₹900.00
50	ECG (ELECTROCARDIOGRAM) (IP)	1.00	₹480.00	₹0.00	₹480.00
51	PROCALCITONIN-PCT	1.00	₹3,600.00	₹0.00	₹3,600.00

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Visit Date	: 19/03/2024 6:06:27AM	**Entity Name**	: ROYAL SUNDARAM INSURAN
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S.No	Description	Qty	Unit Rate	Discount	Amount
52	ABG BLOOD GAS	1.00	₹1,080.00	₹0.00	₹1,080.00
53	POTASSIUM (K +)	1.00	₹376.00	₹0.00	₹376.00
54	ABG BLOOD GAS	1.00	₹1,080.00	₹0.00	₹1,080.00
55	TOTAL WBC COUNT	1.00	₹180.00	₹0.00	₹180.00
56	SODIUM (NA +)	1.00	₹376.00	₹0.00	₹376.00
57	UREA	1.00	₹300.00	₹0.00	₹300.00
58	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹180.00	₹0.00	₹540.00
59	PHYSIOTHERAPHY CHARGES	2.00	₹700.00	₹0.00	₹1,400.00
60	CHEST X-RAY - BEDSIDE	1.00	₹900.00	₹0.00	₹900.00
61	CREATININE	1.00	₹300.00	₹0.00	₹300.00
62	SODIUM (NA +)	1.00	₹376.00	₹0.00	₹376.00
63	SERUM KETONES (ß-HYDROXYBUTYRATE)	1.00	₹900.00	₹0.00	₹900.00
64	CHEST X-RAY - BEDSIDE	1.00	₹900.00	₹0.00	₹900.00

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S.No	Description	Qty	Unit Rate	Discount	Amount
65	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹180.00	₹0.00	₹540.00
66	URINE ROUTINE ANALYSIS	1.00	₹270.00	₹0.00	₹270.00
67	ABG BLOOD GAS	1.00	₹1,080.00	₹0.00	₹1,080.00
68	PHYSIOTHERAPHY CHARGES	2.00	₹700.00	₹0.00	₹1,400.00
69	PROCALCITONIN-PCT	1.00	₹3,600.00	₹0.00	₹3,600.00
70	POTASSIUM (K +)	1.00	₹376.00	₹0.00	₹376.00
71	TOTAL WBC COUNT	1.00	₹180.00	₹0.00	₹180.00
72	HAEMOGLOBIN	1.00	₹300.00	₹0.00	₹300.00
73	ABG BLOOD GAS	1.00	₹1,080.00	₹0.00	₹1,080.00
74	TOTAL WBC COUNT	1.00	₹180.00	₹0.00	₹180.00
75	CHEST X-RAY - BEDSIDE	1.00	₹900.00	₹0.00	₹900.00
76	POTASSIUM (K +)	1.00	₹376.00	₹0.00	₹376.00
77	RYLES TUBE INSERTION	1.00	₹500.00	₹0.00	₹500.00

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S.No	Description	Qty	Unit Rate	Discount	Amount
78	SODIUM (NA +)	1.00	₹376.00	₹0.00	₹376.00
79	SERUM KETONES (ß-HYDROXYBUTYRATE)	1.00	₹900.00	₹0.00	₹900.00
80	POTASSIUM (K +)	1.00	₹376.00	₹0.00	₹376.00
81	UREA	1.00	₹300.00	₹0.00	₹300.00
82	CREATININE	1.00	₹300.00	₹0.00	₹300.00
83	CBG. (CAPILLARY BLOOD GLUCOSE)	10.00	₹180.00	₹0.00	₹1,800.00
84	MAGNESIUM	1.00	₹1,050.00	₹0.00	₹1,050.00
85	PHYSIOTHERAPHY CHARGES	1.00	₹700.00	₹0.00	₹700.00
86	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹180.00	₹0.00	₹540.00
87	SODIUM (NA +)	1.00	₹376.00	₹0.00	₹376.00
88	PHYSIOTHERAPHY CHARGES	1.00	₹600.00	₹0.00	₹600.00
89	PHYSIOTHERAPHY CHARGES	1.00	₹700.00	₹0.00	₹700.00
90	POTASSIUM (K +)	1.00	₹376.00	₹0.00	₹376.00

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S.No	Description	Qty	Unit Rate	Discount	Amount
91	TOTAL WBC COUNT	1.00	₹180.00	₹0.00	₹180.00
92	ABG BLOOD GAS	1.00	₹1,080.00	₹0.00	₹1,080.00
93	PHYSIOTHERAPHY CHARGES	1.00	₹600.00	₹0.00	₹600.00
94	EEG	1.00	₹5,400.00	₹0.00	₹5,400.00
95	SODIUM (NA +)	1.00	₹330.00	₹0.00	₹330.00
96	POTASSIUM (K +)	1.00	₹330.00	₹0.00	₹330.00
97	EEG	1.00	₹5,400.00	₹0.00	₹5,400.00
98	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹158.00	₹0.00	₹474.00
99	DMO CHARGE - TWIN SHARING	.00 days	₹750.00	₹0.00	₹750.00
100	PROFESSIONAL FEES(Dr.BALAMURUGAN.S)	1.00	₹5,500.00	₹0.00	₹5,500.00
101	INTENSIVIST PROFESSIONAL CHARGE - ICU	.50 days	₹3,000.00	₹0.00	₹19,500.00
102	PHARMACY CHARGE	1.00	₹95,080.00	₹0.00	₹95,080.00
103	NURSING CHARGE - ICU	.50 days	₹2,000.00	₹0.00	₹13,000.00

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S.No	Description	Qty	Unit Rate	Discount	Amount
104	PROFESSIONAL FEES(Dr.T.PALANIAPPAN)	1.00	₹6,600.00	₹0.00	₹6,600.00
105	BED CHARGES - TWIN SHARING ROOM	.00 days	₹2,750.00	₹0.00	₹2,750.00
106	OTHER ADDITION	1.00	₹51,106.00	₹0.00	₹51,106.00
107	NURSING CHARGE - TWIN SHARING	.00 days	₹800.00	₹0.00	₹800.00
108	PROFESSIONAL FEES(Dr.SREENIVAS.U.M)	1.00	₹2,200.00	₹0.00	₹2,200.00
109	BED CHARGES - ICU	.50 days	₹7,500.00	₹0.00	₹48,750.00
110	PROFESSIONAL FEES(Dr.KIRTHIKA.N)	1.00	₹2,200.00	₹0.00	₹2,200.00

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S.No	Description	Qty	Unit Rate	Discount	Amount
		Total Amount	:		**₹432,358.00**
		Discount Amount	:		**₹29,572.00**
		Net Amount	:		**₹ 402,786.00**
		Amount Received	:		**₹ 0.00**

Received Amount in Words : **Two Hundred Nine Thousand Five Hundred Only**

KARTHIK C

Authorised Signature