

Out Patient Bill

Patient Name : Ms.SNEHA
Patient Id : MHI202375450
Age/Gender : 25/Female
Phone Number : 6384219431
Doctor Name : Dr.MEDWAY HOSPITAL
Visit Date : 7/13/2024 8:50:31PM
Specialty : GENERAL MEDICINE

Bill No : MMH/MH/ER202403068
Bill Date : 13/07/2024 8:55:35PM
Visit Report Id : MHI202375450-V001
Payment Mode :
Entity Type : CASH
Entity Name : CASH

S.No	Description	Qty	Unit Rate	Discount	Amount
1	CBC	1.00	₹650.00	₹0.00	₹650.00
	Total Amount	:			₹650.00
	Discount Amount	:			₹650.00
	Net Amount	:			₹ 0.00
	Amount Received	:			₹ 0.00

Received Amount : Zero Only
in Words

KARTHICK.S
Authorised Signature