

Out Patient Bill

Patient Name : Mrs.KALYANI V
Patient Id : MMH202476045
Age/Gender : 69 Y 10 M 8 D/Female
Phone Number : 9940047345
Doctor Name : Dr.T.PALANIAPPAN
Visit Date : 28/04/2024 1:08:34PM
Speciality : GENERAL PHYSICIAN & DIAE

Bill No : MMH/MH/IP202400993
Bill Date : 08/05/2024 2:27:25PM
Visit Report Id : MMH202476045-IP002
Payment Mode : CHEQUE
Entity Type : CASH
Entity Name : CASH

S.No	Description	Qty	Unit Rate	Discount	Amount
1	CBG. (CAPILLARY BLOOD GLUCOSE)	1.00	₹150.00	₹0.00	₹150.00
2	PROCALCITONIN-PCT	1.00	₹3,000.00	₹0.00	₹3,000.00
3	ABG BLOOD GAS	1.00	₹900.00	₹0.00	₹900.00
4	CHEST X-RAY - BEDSIDE	1.00	₹750.00	₹0.00	₹750.00
5	ALBUMIN	1.00	₹225.00	₹0.00	₹225.00
6	TOTAL WBC COUNT	1.00	₹150.00	₹0.00	₹150.00
7	RENAL FUNCTION TEST	1.00	₹1,750.00	₹0.00	₹1,750.00
8	CHEST X-RAY - BEDSIDE	1.00	₹750.00	₹0.00	₹750.00
9	PHYSIOTHERAPHY CHARGES	1.00	₹700.00	₹0.00	₹700.00
10	DIATHERMY CHARGES	1.00	₹350.00	₹0.00	₹350.00
11	OT 3 CHARGES	1.00	₹5,000.00	₹0.00	₹5,000.00
12	INSTRUMENT CHARGES	1.00	₹1,000.00	₹0.00	₹1,000.00

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13	CBC	1.00	₹936.00	₹0.00	₹936.00
14	PULMONARY REHAB - IP	1.00	₹10,000.00	₹0.00	₹10,000.00
15	ABG BLOOD GAS	1.00	₹1,037.00	₹0.00	₹1,037.00
16	ABG BLOOD GAS	1.00	₹1,037.00	₹0.00	₹1,037.00
17	PHYSIOTHERAPY CHARGES	1.00	₹1,000.00	₹0.00	₹1,000.00
18	RENAL FUNCTION TEST	1.00	₹2,016.00	₹0.00	₹2,016.00
19	PHYSIOTHERAPY CHARGES	1.00	₹700.00	₹0.00	₹700.00
20	BLOOD C/S	1.00	₹4,032.00	₹0.00	₹4,032.00
21	PROCALCITONIN-PCT	1.00	₹3,456.00	₹0.00	₹3,456.00
22	CK (CPK - TOTAL)	1.00	₹864.00	₹0.00	₹864.00
23	BLOOD C/S	1.00	₹4,032.00	₹0.00	₹4,032.00
24	MAGNESIUM	1.00	₹1,008.00	₹0.00	₹1,008.00
25	CBC	1.00	₹936.00	₹0.00	₹936.00

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26	PARATHYROID HORMONE (PTH)	1.00	₹2,592.00	₹0.00	₹2,592.00
27	RENAL FUNCTION TEST	1.00	₹2,016.00	₹0.00	₹2,016.00
28	25-OH VITAMIN D3	1.00	₹2,592.00	₹0.00	₹2,592.00
29	CVP (CENTRAL VENOUS PRESSURE)	1.00	₹2,500.00	₹0.00	₹2,500.00
30	CHEST X-RAY - BEDSIDE	1.00	₹864.00	₹0.00	₹864.00
31	DIETICIAN FEES - IP	1.00	₹500.00	₹0.00	₹500.00
32	BLOOD C/S	1.00	₹4,032.00	₹0.00	₹4,032.00
33	PERIPHERAL SMEAR	1.00	₹864.00	₹0.00	₹864.00
34	DRESSING CHARGES	1.00	₹450.00	₹0.00	₹450.00
35	PHYSIOTHERAPHY CHARGES	1.00	₹600.00	₹0.00	₹600.00
36	TOTAL WBC COUNT	1.00	₹173.00	₹0.00	₹173.00
37	CHEST AP VIEW	1.00	₹720.00	₹0.00	₹720.00
38	ACCU FLOW MONITOR	4.00	₹600.00	₹0.00	₹2,400.00

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39	PHYSIOTHERAPY CHARGES	2.00	₹600.00	₹0.00	₹1,200.00
40	ALPHA BED	1.00	₹400.00	₹0.00	₹400.00
41	TOTAL WBC COUNT	1.00	₹173.00	₹0.00	₹173.00
42	PROFESSIONAL FEES(Dr.MEDWAY HOSPITAL)	1.00	₹1,500.00	₹0.00	₹1,500.00
43	PROFESSIONAL FEES(Dr.SATHISH BABU)	1.00	₹6,000.00	₹0.00	₹6,000.00
44	PROFESSIONAL FEES(Dr.ARUN RAMANAN)	1.00	₹1,000.00	₹0.00	₹1,000.00
45	PROFESSIONAL FEES(Dr.SREENIVAS.U.M)	1.00	₹2,000.00	₹0.00	₹2,000.00
46	PROFESSIONAL FEES(Dr.ELAKIYA MATHIMARAN)	1.00	₹1,500.00	₹0.00	₹1,500.00
47	PROFESSIONAL FEES(Dr.ANISH)	1.00	₹1,500.00	₹0.00	₹1,500.00
48	PROFESSIONAL FEES(Dr.SUPRAJA K)	1.00	₹1,500.00	₹0.00	₹1,500.00
49	PHYSIOTHERAPY CHARGES	1.00	₹600.00	₹0.00	₹600.00
50	PROFESSIONAL FEES(Dr.VISHNUBABU.G)	1.00	₹40,000.00	₹0.00	₹40,000.00
51	PROFESSIONAL FEES(Dr.T.PALANIAPPAN)	1.00	₹18,000.00	₹0.00	₹18,000.00

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52	PROFESSIONAL FEES(Dr.SURESH KUMAR)	1.00	₹10,000.00	₹0.00	₹10,000.00
53	BED CHARGES - ICU	.50 days	₹7,500.00	₹0.00	₹26,250.00
54	NURSING CHARGE - ICU	.50 days	₹2,000.00	₹0.00	₹7,000.00
55	DMO CHARGE	.00 days	₹750.00	₹0.00	₹4,500.00
56	PHARMACY CHARGE	1.00	₹204,685.00	₹0.00	₹204,685.0
57	NURSING CHARGE - SINGLE DELUXE ROOM	.00 days	₹800.00	₹0.00	₹4,800.00
58	INTENSIVIST PROFESSIONAL CHARGE - ICU	.50 days	₹3,000.00	₹0.00	₹10,500.00
59	BED CHARGES - SINGLE DELUXE ROOM	.00 days	₹4,950.00	₹0.00	₹29,700.00
60	RENAL FUNCTION TEST	1.00	₹1,750.00	₹0.00	₹1,750.00
61	ECG (ELECTROCARDIOGRAM) (IP)	1.00	₹400.00	₹0.00	₹400.00
62	LIVER FUNCTION TEST	1.00	₹1,000.00	₹0.00	₹1,000.00
63	ADMINISTRATION CHARGES	1.00	₹350.00	₹0.00	₹350.00
64	URINE ROUTINE ANALYSIS	1.00	₹225.00	₹0.00	₹225.00

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65	CBG. (CAPILLARY BLOOD GLUCOSE)	2.00	₹150.00	₹0.00	₹300.00
66	ECHO - (IP)	1.00	₹2,000.00	₹0.00	₹2,000.00
67	PROCALCITONIN-PCT	1.00	₹3,000.00	₹0.00	₹3,000.00
68	D - DIMER	1.00	₹3,125.00	₹0.00	₹3,125.00
69	ABG BLOOD GAS	1.00	₹900.00	₹0.00	₹900.00
70	MONITOR CHARGE 1 DAY	6.00	₹2,000.00	₹0.00	₹12,000.00
71	CT CHEST - IP	1.00	₹5,500.00	₹0.00	₹5,500.00
72	DIET CHARGES	2.00	₹500.00	₹0.00	₹1,000.00
73	OXYGEN CHARGE 1 DAY	2.00	₹4,000.00	₹0.00	₹8,000.00
74	CBC	1.00	₹813.00	₹0.00	₹813.00
75	ATTENDER BED/ROOM OCCUPIED	3.50	₹3,850.00	₹0.00	₹13,475.00
76	PROCALCITONIN-PCT	1.00	₹3,000.00	₹0.00	₹3,000.00
77	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹150.00	₹0.00	₹450.00

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78	PHYSIOTHERAPY CHARGES	1.00	₹700.00	₹0.00	₹700.00
79	SODIUM (NA +)	1.00	₹313.00	₹0.00	₹313.00
80	POTASSIUM (K +)	1.00	₹375.00	₹0.00	₹375.00
81	GRAM STAIN FOR URINE	1.00	₹300.00	₹0.00	₹300.00
82	VENOUS DOPPLER BOTH LEGS	1.00	₹4,000.00	₹0.00	₹4,000.00
83	CT PULMONARY ANGIOGRAM	1.00	₹14,500.00	₹0.00	₹14,500.00
84	URINE CULTURE & SENSITIVITY	1.00	₹1,125.00	₹0.00	₹1,125.00
85	CVP (CENTRAL VENOUS PRESSURE)	1.00	₹2,500.00	₹0.00	₹2,500.00
86	USG ABDOMEN (IP)	1.00	₹2,000.00	₹0.00	₹2,000.00
87	TOTAL WBC COUNT	1.00	₹150.00	₹0.00	₹150.00
88	ABG BLOOD GAS	1.00	₹900.00	₹0.00	₹900.00
89	CHEST X-RAY - BEDSIDE	1.00	₹750.00	₹0.00	₹750.00
90	PROTHROMBIN TIME	1.00	₹438.00	₹0.00	₹438.00

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91	APTT	1.00	₹875.00	₹0.00	₹875.00
92	DIATHERMY CHARGES	1.00	₹350.00	₹0.00	₹350.00
93	CHEST X-RAY - BEDSIDE	1.00	₹750.00	₹0.00	₹750.00
94	FENTANYL	1.00	₹200.00	₹0.00	₹200.00
95	INSTRUMENT CHARGES	1.00	₹1,000.00	₹0.00	₹1,000.00
96	RENAL FUNCTION TEST	1.00	₹1,750.00	₹0.00	₹1,750.00
97	H1N1-INFLUENZA	1.00	₹6,000.00	₹0.00	₹6,000.00
98	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹150.00	₹0.00	₹450.00
99	OT 1 CHARGES	1.00	₹7,000.00	₹0.00	₹7,000.00
100	ABG BLOOD GAS	1.00	₹900.00	₹0.00	₹900.00
101	CBC	1.00	₹813.00	₹0.00	₹813.00

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	Total Amount	:			₹544,317.00
	Discount Amount	:			₹75,000.00
	Net Amount	:			₹ 469,317.00
	Amount Received	:			₹ 200,000.00
	Due Amount	:			₹ 169,317.00

Received Amount : Three Hundred Thousand Only
in Words

SATHISH KUMAR.S
Authorised Signature