Out Patient Bill

Patient Name	: **Mrs.ROSELIN MARGERAT RANI**	**Bill No**	: MMH/MH/IP202400995
Patient Id	: **MMH202476336**	**Bill Date**	: 08/05/2024 2:53:52PM
Age/Gender	: 59 Y 6 M 18 D/Female	**Visit Report Id**	: MMH202476336-IP001
Phone Number	: 9094558789	**Payment Mode**	:
Doctor Name	: Dr.DURAI RAVI	**Entity Type**	: Insurance
Visit Date	: 30/04/2024 5:33:43PM	**Entity Name**	: THE NEW INDIA ASSURANCE
Speciality	: GENERAL AND LAPAROSCOF	**TPA**	: MD INDIA TPA PVT LTD

S.No	Description	Qty	Unit Rate	Discount	Amount
1	SCD CHARGE (DVT)	1.00	₹1,500.00	₹0.00	₹1,500.00
2	MONITOR CHARGE 1 DAY	2.00	₹1,000.00	₹0.00	₹2,000.00
3	OT 1 CHARGES	1.00	₹12,500.00	₹0.00	₹12,500.00
4	HARMONIC SCALPEL	1.00	₹10,000.00	₹0.00	₹10,000.00
5	SEVOFLOURANE	1.00	₹4,000.00	₹0.00	₹4,000.00
6	CHEST X-RAY	1.00	₹630.00	₹0.00	₹630.00
7	BLOOD CHARGES	2.00	₹1,550.00	₹0.00	₹3,100.00
8	SYRINGE PUMP CHARGE	1.00	₹1,000.00	₹0.00	₹1,000.00
9	CATHETERIZATION CHARGES	1.00	₹500.00	₹0.00	₹500.00
10	DRESSING CHARGES	1.00	₹450.00	₹0.00	₹450.00
11	DIATHERMY CHARGES	1.00	₹350.00	₹0.00	₹350.00
12	SPECIMEN CONTAINER	1.00	₹500.00	₹0.00	₹500.00

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13	FENTANYL	1.00	₹200.00	₹0.00	₹200.00
14	PCR FOR TB	1.00	₹0.00	₹0.00	₹0.00
15	DRESSING CHARGES	1.00	₹450.00	₹0.00	₹450.00
16	CBG. (CAPILLARY BLOOD GLUCOSE)	2.00	₹180.00	₹0.00	₹360.00
17	ECG (ELECTROCARDIOGRAM) (IP)	1.00	₹480.00	₹0.00	₹480.00
18	ATTENDER BED/ROOM OCCUPIED	2.00	₹1,100.00	₹0.00	₹2,200.00
19	GENEXPERT MTB/RIF	1.00	₹5,670.00	₹0.00	₹5,670.00
20	ECHO - (IP)	1.00	₹2,000.00	₹0.00	₹2,000.00
21	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹180.00	₹0.00	₹540.00
22	RENAL FUNCTION TEST	1.00	₹2,100.00	₹0.00	₹2,100.00
23	CHEST X-RAY - BEDSIDE	1.00	₹900.00	₹0.00	₹900.00
24	HPE - 3	1.00	₹5,040.00	₹0.00	₹5,040.00
25	PHYSIOTHERAPHY CHARGES	2.00	₹700.00	₹0.00	₹1,400.00

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26	CBC	1.00	₹976.00	₹0.00	₹976.00
27	CBC	1.00	₹976.00	₹0.00	₹976.00
28	RENAL FUNCTION TEST	1.00	₹2,100.00	₹0.00	₹2,100.00
29	CBG. (CAPILLARY BLOOD GLUCOSE)	1.00	₹180.00	₹0.00	₹180.00
30	ALBUMIN	1.00	₹270.00	₹0.00	₹270.00
31	POTASSIUM (K +)	1.00	₹378.00	₹0.00	₹378.00
32	PHYSIOTHERAPHY CHARGES	1.00	₹500.00	₹0.00	₹500.00
33	TOTAL WBC COUNT	1.00	₹151.00	₹0.00	₹151.00
34	PHYSIOTHERAPHY CHARGES	1.00	₹500.00	₹0.00	₹500.00
35	DRESSING CHARGES	1.00	₹450.00	₹0.00	₹450.00
36	NURSING CHARGE - GENERAL WARD	.00 days	₹800.00	₹0.00	₹800.00
37	INTENSIVIST PROFESSIONAL CHARGE - ICU	.00 days	₹3,000.00	₹0.00	₹6,000.00
38	PROFESSIONAL FEES(Dr.SATHISH BABU)	1.00	₹13,200.00	₹0.00	₹13,200.00

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39	BED CHARGES - ICU	.00 days	₹7,500.00	₹0.00	₹15,000.00
40	NURSING CHARGE - GENERAL WARD	.00 days	₹800.00	₹0.00	₹2,400.00
41	PROFESSIONAL FEES(Dr.T.PALANIAPPAN)	1.00	₹3,300.00	₹0.00	₹3,300.00
42	DMO CHARGE - GENERAL WARD	.00 days	₹750.00	₹0.00	₹2,250.00
43	PROFESSIONAL FEES(Dr.DURAI RAVI)	1.00	₹66,000.00	₹0.00	₹66,000.00
44	BED CHARGES - GENERAL WARD	.00 days	₹1,100.00	₹0.00	₹1,100.00
45	PROFESSIONAL FEES(Dr.SUHIL AHMED.M)	1.00	₹44,000.00	₹0.00	₹44,000.00
46	NURSING CHARGE - ICU	.00 days	₹2,000.00	₹0.00	₹4,000.00
47	PHARMACY CHARGE	1.00	₹70,833.00	₹0.00	₹70,833.00
48	BED CHARGES - GENERAL WARD	.00 days	₹1,100.00	₹0.00	₹3,300.00
49	PROFESSIONAL FEES(Dr.MEDWAY HOSPITAL)	1.00	₹1,650.00	₹0.00	₹1,650.00
50	DMO CHARGE - GENERAL WARD	.00 days	₹750.00	₹0.00	₹750.00
51	OTHER ADDITION	1.00	₹22,564.00	₹0.00	₹22,564.00

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52	BLOOD GROUP AND RH TYPE	1.00	₹227.00	₹0.00	₹227.00
53	ADMINISTRATION CHARGES	1.00	₹350.00	₹0.00	₹350.00
54	SEROLOGY(HIV/HBSAG/HCV)ELISA	1.00	₹4,234.00	₹0.00	₹4,234.00

Total Amount	:	**₹326,309.00**
Net Amount	:	**₹ 326,309.00**
Amount Received	:	**₹ 0.00**

Received Amount in Words : **Thirty-Two Thousand One Hundred One Only**

SATHISH KUMAR.S
Authorised Signature