

Out Patient Bill

Patient Name : Mrs.AKSHATHA PUJARI
Patient Id : MHI202373016
Age/Gender : 34 Y 3 M 14 D/Female
Phone Number : 9986339987
Doctor Name : Dr.T.PALANIAPPAN
Visit Date : 06/05/2024 11:35:38AM
Speciality : GENERAL PHYSICIAN & DIAE

Bill No : MMH/MH/IP202401065
Bill Date : 16/05/2024 8:12:33PM
Visit Report Id : MHI202373016-IP001
Payment Mode :
Entity Type : Insurance
Entity Name : FUTURE GENERALI INDIA IN

S.No	Description	Qty	Unit Rate	Discount	Amount
1	CBC	1.00	₹858.00	₹0.00	₹858.00
2	CBG. (CAPILLARY BLOOD GLUCOSE)	1.00	₹158.00	₹0.00	₹158.00
3	ADMINISTRATION CHARGES	1.00	₹350.00	₹0.00	₹350.00
4	RENAL FUNCTION TEST	1.00	₹1,848.00	₹0.00	₹1,848.00
5	LIVER FUNCTION TEST	1.00	₹1,056.00	₹0.00	₹1,056.00
6	ECHO - (IP)	1.00	₹2,000.00	₹0.00	₹2,000.00
7	SEROLOGY (HIV/HBSAG/ANTI HCV)-ELISA	1.00	₹4,435.00	₹0.00	₹4,435.00
8	ECG (ELECTROCARDIOGRAM) (IP)	1.00	₹480.00	₹0.00	₹480.00
9	TSH	1.00	₹200.00	₹0.00	₹200.00
10	ACTH AM	1.00	₹2,592.00	₹0.00	₹2,592.00
11	DIET CHARGES	8.00	₹500.00	₹0.00	₹4,000.00
12	PROLACTIN	1.00	₹864.00	₹0.00	₹864.00

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13	MONITOR CHARGE 1 DAY	2.00	₹2,000.00	₹0.00	₹4,000.00
14	CORTISOL (AM)	1.00	₹1,037.00	₹0.00	₹1,037.00
15	APTT	1.00	₹1,050.00	₹0.00	₹1,050.00
16	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹180.00	₹0.00	₹540.00
17	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹180.00	₹0.00	₹540.00
18	DIETICIAN FEES - IP	1.00	₹1,000.00	₹0.00	₹1,000.00
19	CBG. (CAPILLARY BLOOD GLUCOSE)	1.00	₹173.00	₹0.00	₹173.00
20	MEDICAL RECORD CHARGE	1.00	₹500.00	₹0.00	₹500.00
21	AMBULANCE CHARGES	1.00	₹37,500.00	₹0.00	₹37,500.00
22	CBG. (CAPILLARY BLOOD GLUCOSE)	2.00	₹173.00	₹0.00	₹346.00
23	RADIOTHERAPY	1.00	₹762,000.00	₹0.00	₹762,000.00
24	PHARMACY CHARGE	1.00	₹6,760.00	₹0.00	₹6,760.00
25	PROFESSIONAL FEES(Dr.MEDWAY HOSPITAL)	1.00	₹1,500.00	₹0.00	₹1,500.00

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S.No	Description	Qty	Unit Rate	Discount	Amount
26	BED CHARGES - TWIN SHARING ROOM	.00 days	₹2,750.00	₹0.00	₹5,500.00
27	BED CHARGES - SINGLE ROOM	.50 days	₹4,200.00	₹0.00	₹18,900.00
28	NURSING CHARGE - TWIN SHARING	.00 days	₹800.00	₹0.00	₹1,600.00
29	DMO CHARGE - TWIN SHARING	.00 days	₹750.00	₹0.00	₹1,500.00
30	BED CHARGES - ICU	.00 days	₹7,500.00	₹0.00	₹7,500.00
31	OTHER ADDITION	1.00	₹404,925.00	₹0.00	₹404,925.0
32	NURSING CHARGE - ICU	.00 days	₹2,000.00	₹0.00	₹2,000.00
33	NURSING CHARGE - SINGLE ROOM	.50 days	₹800.00	₹0.00	₹3,600.00
34	PROFESSIONAL FEES(Dr.T.PALANIAPPAN)	1.00	₹11,000.00	₹0.00	₹11,000.00
35	DMO CHARGE - SINGLE ROOM	.50 days	₹750.00	₹0.00	₹3,375.00
36	INTENSIVIST PROFESSIONAL CHARGE - ICU	.00 days	₹3,000.00	₹0.00	₹3,000.00
37	PROFESSIONAL FEES(Dr.ARAVIND. S.S)	1.00	₹4,400.00	₹0.00	₹4,400.00

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S.No	Description	Qty	Unit Rate	Discount	Amount
		Total Amount	:		₹1,303,087.00
		Discount Amount	:		₹25,000.00
		Net Amount	:		₹ 1,278,087.00
		Amount Received	:		₹ 0.00

Received Amount	: One Hundred Forty-Nine Thousand Two Hundred	KARTHIK C
in Words	Eighty-Four Only	Authorised Signature