Out Patient Bill

Patient Name	: **Mr.JAYAGOPAL G**	**Bill No**	: MMH/MH/IP202401091
Patient Id	: **MMH202476923**	**Bill Date**	: 22/05/2024 12:55:10PM
Age/Gender	: 39 Y 9 M 12 D/Male	**Visit Report Id**	: MMH202476923-IP001
Phone Number	: 9150579951	**Payment Mode**	:
Doctor Name	: Dr.T.PALANIAPPAN	**Entity Type**	: Insurance
Visit Date	: 13/05/2024 7:18:34PM	**Entity Name**	: STAR HEALTH AND ALLIED I
Speciality	: GENERAL PHYSICIAN & DIAE	**TPA**	: STAR HEALTH AND ALLIED IN

S.No	Description	Qty	Unit Rate	Discount	Amount
1	OT 1 CHARGES	1.00	₹7,000.00	₹0.00	₹7,000.00
2	BLEEDING TIME	1.00	₹180.00	₹0.00	₹180.00
3	CREATININE	1.00	₹300.00	₹0.00	₹300.00
4	MONITOR CHARGE 1 DAY	1.00	₹2,000.00	₹0.00	₹2,000.00
5	ECG (ELECTROCARDIOGRAM) (IP)	1.00	₹480.00	₹0.00	₹480.00
6	GLUCOSE (RANDOM)	1.00	₹226.00	₹0.00	₹226.00
7	CT BRAIN - IP	1.00	₹3,600.00	₹0.00	₹3,600.00
8	CLOTTING TIME	1.00	₹180.00	₹0.00	₹180.00
9	PROTHROMBIN TIME	1.00	₹526.00	₹0.00	₹526.00
10	UREA	1.00	₹300.00	₹0.00	₹300.00
11	ADMINISTRATION CHARGES	1.00	₹350.00	₹0.00	₹350.00
12	LIVER FUNCTION TEST	1.00	₹1,200.00	₹0.00	₹1,200.00

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13	CBG. (CAPILLARY BLOOD GLUCOSE)	1.00	₹180.00	₹0.00	₹180.00
14	MLC REGISTRATION CHARGE (IP)	1.00	₹500.00	₹0.00	₹500.00
15	SEROLOGY(HIV/HBSAG/HCV)ELISA	1.00	₹5,040.00	₹0.00	₹5,040.00
16	CBC	1.00	₹976.00	₹0.00	₹976.00
17	BLOOD GROUP AND RH TYPE	1.00	₹270.00	₹0.00	₹270.00
18	CBG. (CAPILLARY BLOOD GLUCOSE)	3.00	₹180.00	₹0.00	₹540.00
19	DIET CHARGES	3.00	₹500.00	₹0.00	₹1,500.00
20	HBA1C	1.00	₹1,080.00	₹0.00	₹1,080.00
21	THYROID PROFILE FREE	1.00	₹1,296.00	₹0.00	₹1,296.00
22	LIPID PROFILE	1.00	₹1,080.00	₹0.00	₹1,080.00
23	FOOT AP/OBLIQUE VIEW (RIGHT)	1.00	₹864.00	₹0.00	₹864.00
24	BED CHARGES - SINGLE ROOM	.00 days	₹4,200.00	₹0.00	₹8,400.00
25	OTHER ADDITION	1.00	₹27,403.00	₹0.00	₹27,403.00

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26	PROFESSIONAL FEES(Dr.VISHNUBABU.G)	1.00	₹11,000.00	₹0.00	₹11,000.00
27	INTENSIVIST PROFESSIONAL CHARGE - ICU	.00 days	₹3,000.00	₹0.00	₹3,000.00
28	BED CHARGES - ICU	.00 days	₹7,500.00	₹0.00	₹7,500.00
29	NURSING CHARGE - ICU	.00 days	₹2,000.00	₹0.00	₹2,000.00
30	PHARMACY CHARGE	1.00	₹11,722.00	₹0.00	₹11,722.00
31	DMO CHARGE - SINGLE ROOM	.00 days	₹750.00	₹0.00	₹1,500.00
32	NURSING CHARGE - SINGLE ROOM	.00 days	₹800.00	₹0.00	₹1,600.00
33	PROFESSIONAL FEES(Dr.T.PALANIAPPAN)	1.00	₹6,600.00	₹0.00	₹6,600.00

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S.No	Description	Qty	Unit Rate	Discount	Amount
		Total Amount	:		**₹110,393.00**
		Discount Amount	:		**₹10,307.00**
		Net Amount	:		**₹ 100,086.00**
		Amount Received	:		**₹ 0.00**

Received Amount in Words : **Zero Only**

KARTHIK C

Authorised Signature