Vinita HOSPITAL NABH CERTIFIED

General Bill - Cash

Bill No	:	**OP46397**	HR No	:	**25078**
Bill Date	:	**20-08-2026 11:38:10 AM**	Age/Sex	:	**55Y 3M / Female**
Patient Name	:	**Ms. N. ANITHA**			

Description	Amount
Dr. Sarita Vinod	
1. Calcium	**290.00**
2. Phosphorous	**270.00**
3. Liver Function Test	**830.00**
4. Electrolytes	**560.00**
Bill Amount	**1,950.00**

Received Amount	:	**Rs. 1950.00**
Received Amount in Words	:	**One thousand nine hundred and fifty only**
Balance Amount	:	**Rs. 0.00**
Mode of Payment	:	**Cash**
Bill Location	:	**Vinita Hospital, Nungambakkam**

Jeevitha P
Authorized Signatories

This is a system-generated bill. Therefore, no seal or signature is required.

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A unit of Vijay Ganga Speciality Care Pvt. Ltd.