General Bill - Cash

Bill No	:	**OP46866**	HR No	:	**24485**
Bill Date	:	**31-08-2026 11:26:27 AM**	Age/Sex	:	**69Y 2M / Female**
Patient Name	:	**Mrs. SHANTHI PRAVEEN**			

Description	Amount
Dr. Sarita Vinod	
1. Urea	**220.00**
2. Creatinine	**290.00**
3. Electrolytes	**560.00**
4. Complete Blood Count & ESR	**440.00**
5. Consultation Fees	**1,000.00**
Bill Amount	**2,510.00**

Mode of Payment : **Cash**

Bill Location : **Vinita Hospital, Nungambakkam**

Tharakavi S
Authorized Signatories

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

No.70, Josier Street, Nungambakkam, Chennai - 600 034.
P: +91 44 6903 9999, +91 72990 78999
E : info@vinitahealth.com | **W :** www.vinitahealth.com
A unit of Vijay Ganga Speciality Care Pvt. Ltd.