

General Bill - Cash

Bill No : **OP46112** HR No : **24120**
Bill Date : **12-08-2026 05:44:29 PM** Age/Sex : **81Y 3M / Male**
Patient Name : **Mr. A.KRISHNAN**

Description	Amount
Dr. Madhuri A N S	
1. Electrolytes	560.00
2. Renal Function Test	700.00
3. Consultation Fees	2,000.00
Bill Amount	3,260.00

Mode of Payment : **Card**
Bill Location : **Vinita Hospital, Nungambakkam**

Tharakavi S
Authorized Signatories

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