Vinita HOSPITAL NABH CERTIFIED

General Bill - Cash

Bill No	:	**OP46884**	HR No	:	**14836**
Bill Date	:	**31-08-2026 04:47:14 PM**	Age/Sex	:	**64Y 2M / Female**
Patient Name	:	**Ms. MAGESHWARI**			

Description	Amount
Dr. Sarita Vinod	
1. Urea	**220.00**
2. Creatinine	**290.00**
3. Electrolytes	**560.00**
4. Urine Pr/Cr Ratio	**620.00**
Bill Amount	**1,690.00**

Received Amount	:	**Rs. 1690.00**
Received Amount in Words	:	**One thousand six hundred and ninety only**
Balance Amount	:	**Rs. 0.00**
Mode of Payment	:	**E-Payment**
Bill Location	:	**Vinita Hospital, Nungambakkam**

Jayarajan M
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.