General Bill - Cash

Bill No	:	**OP46564**	HR No	:	**2522**
Bill Date	:	**25-08-2026 11:01:05 AM**	Age/Sex	:	**52Y 8M / Female**
Patient Name	:	**Mrs. Gowri V. H.**			

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. Urine Routine Analysis	**180.00**
6. Urine Pr/Cr Ratio	**620.00**
7. Consultation Fees	**1,000.00**
Bill Amount	**3,310.00**

Mode of Payment : **E-Payment**

Bill Location : **Vinita Hospital, Nungambakkam**

Tharakavi S
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.