

## General Bill - Cash

Bill No : **OP43775** HR No : **23854**  
Bill Date : **04-06-2026 05:58:20 PM** Age/Sex : **81Y / Female**  
Patient Name : **Ms. P.JANAKI**

Description	Amount
<b>Dr. Sarita Vinod</b>	
1. Urine Sodium	<b>310.00</b>
2. Urine Osmolality	<b>990.00</b>
3. RBS - Random Plasma Glucose	<b>80.00</b>
<b>Bill Amount</b>	<b>1,380.00</b>

Received Amount : **Rs. 1380.00**  
Received Amount in Words : **One thousand three hundred and eighty only**  
Balance Amount : **Rs. 0.00**  
Mode of Payment : **E-Payment**  
Bill Location : **Vinita Hospital, Nungambakkam**

**Jeevitha P**  
Authorized Signatories

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