

## H@H Lab Bill - Credit

Bill No : **HL1241**

Doctor :

Bill Date : **21-11-2025**

HR No : **20944**

Patient Name : **Ms. PREMKUMARI**

Age/Sex : **80Y 5M / Female**

Description	Amount
1. TSH	<b>360.00</b>
2. Electrolytes	<b>540.00</b>
3. Lipid Profile	<b>660.00</b>
4. Urine Routine Analysis	<b>170.00</b>
5. Urine Pr/Cr Ratio	<b>580.00</b>
6. HbA1c	<b>540.00</b>
<b>Bill Amount</b>	<b>2,850.00</b>

Pending Amount : **Rs. 2,850**

Bill Location : **Vinita Hospital, Nungambakkam**

Client Name :

**anusuya**  
Authorized Signatory