Vinita HOSPITAL NABH CERTIFIED

General Bill - Cash

Bill No	:	**OP44761**	HR No	:	**24664**
Bill Date	:	**08-07-2026 01:49:51 PM**	Age/Sex	:	**51Y / Female**
Patient Name	:	**Mrs. SUJATHA P**			

Description	Amount
Dr. Sarita Vinod	
1. *Reticulocyte count	**565.00**
2. Urea	**220.00**
3. Creatinine	**290.00**
4. Liver Function Test	**830.00**
5. Electrolytes	**540.00**
6. Lipid Profile	**660.00**
7. HbA1c	**540.00**
8. Urine Pr/Cr Ratio	**620.00**
9. IRON PROFILE WITH FERRITIN	**1,750.00**
10. CT SCAN ABDOMEN	**5,500.00**
Bill Amount	**11,515.00**

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

Jeevitha P
Authorized Signatories

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