Vinita HOSPITAL NABH CERTIFIED

General Bill - Cash

Bill No	:	**OP45011**	HR No	:	**23051**
Bill Date	:	**14-07-2026 03:16:09 PM**	Age/Sex	:	**36Y 3M / Female**
Patient Name	:	**Mrs. C. DEVAKI**			

Description	Amount
Dr. Veena V C	
1. *Bhcg	**760.00**
2. RBS - Random Plasma Glucose	**80.00**
3. TSH	**370.00**
4. Free T4	**330.00**
5. Complete Blood Count & ESR	**390.00**
6. HbA1c	**540.00**
7. USG TRANSVEGINAL STUDY (TVS)	**2,500.00**
Bill Amount	**4,970.00**

Received Amount	:	**Rs. 4970.00**
Received Amount in Words	:	**Four thousand nine hundred and seventy 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.

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A unit of Vijay Ganga Speciality Care Pvt. Ltd.