Vinita HOSPITAL NABH CERTIFIED

General Bill - Cash

Bill No	:	**OP43863**	HR No	:	**20618**
Bill Date	:	**08-06-2026 10:13:11 AM**	Age/Sex	:	**23Y 11M / Male**
Patient Name	:	**Mr. RAGHU.V.R**			

Description	Amount
Dr. ANURADHA V	
1. CRP C-Reactive Protein	**540.00**
2. RBS - Random Plasma Glucose	**80.00**
3. Liver Function Test	**830.00**
4. Complete Blood Count & ESR	**390.00**
5. Renal Function Test	**650.00**
6. Consultation Fees	**1,000.00**
7. IV Injection	**200.00**
Bill Amount	**3,690.00**

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.