

General Bill - Cash

Bill No : **OP43724** HR No : **4020**
Bill Date : **02-06-2026 11:33:59 AM** Age/Sex : **31Y 6M / Female**
Patient Name : **Ms. AKSHAYA.KAMARAJ**

Description	Amount
Dr. Sarita Vinod	
1. Urea	220.00
2. Creatinine	290.00
3. Electrolytes	540.00
4. Complete Blood Count & ESR	390.00
5. Lipid Profile	660.00
6. Consultation Fees	1,000.00
Bill Amount	3,100.00

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.