Vinita HOSPITAL NABH CERTIFIED

General Bill - Cash

Bill No	:	**OP45030**	HR No	:	**16447**
Bill Date	:	**14-07-2026 07:10:33 PM**	Age/Sex	:	**54Y 11M / Female**
Patient Name	:	**Mrs. BHARATI M.**			

Description	Amount
Dr. Balaji Saibaba	
1. CRP C-Reactive Protein	**540.00**
2. TSH	**370.00**
3. Vit-D 25-Hydroxy Vitamin D	**1,650.00**
4. Vitamin B12	**1,270.00**
5. Complete Blood Count & ESR	**390.00**
6. Renal Function Test	**650.00**
7. HbA1c	**540.00**
8. DEXA - Spine, Dual femur, Wrist (BMD)	**3,000.00**
9. X-RAY CALCANEUM LAT	**700.00**
10. X-RAY LEFT FOOT AP/OBLIQUE	**800.00**
11. Consultation Fees	**1,000.00**
Bill Amount	**10,910.00**

Received Amount	:	**Rs. 10910.00**
Received Amount in Words	:	**Ten thousand nine hundred and ten 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.