

Medical Bill Receipt

XYZ Hospital

123 Health Street, Wellness City, India 110011

Phone: +91 22 1234 5678

Email: billing@xyzhospital.in

Medical Bill Receipt

Receipt No.: 001234

Date: 05-Jul-2024

Patient Information:

- Name:** John Doe
- Patient ID:** 123456
- Date of Admission:** 01-Jul-2024
- Date of Discharge:** 05-Jul-2024

Billing Details:

Description	Quantit y	Unit Price (₹)	Total Price (₹)
Room Charges	4 days	₹3,000/day	₹12,000.00
Surgery Charges	1	₹50,000.00	₹50,000.00
Anesthesia Charges	1	₹15,000.00	₹15,000.00

Medication Charges			
- Painkillers	10 doses	₹200/dose	₹2,000.00
- Antibiotics	5 doses	₹300/dose	₹1,500.00
Laboratory Charges			
- Blood Test	1	₹1,000.00	₹1,000.00
- X-Ray	1	₹2,000.00	₹2,000.00
Miscellaneous Charges			
- Nursing Service	4 days	₹500/day	₹2,000.00
- Equipment Usage	1	₹3,000.00	₹3,000.00

Total Amount: ₹88,500.00

Payment Information:

- **Insurance Coverage:** ₹50,000.00
- **Patient Payment:** ₹38,500.00

Payment Methods:

- **Cash:** ₹38,500.00

Received By: Dr. Anil Sharma

Signature: _____

Thank you for choosing XYZ Hospital. Get well soon!