

NIZAM'S INSTITUTE OF MEDICAL SCIENCES

(A UNIVERSITY ESTABLISHED UNDER STATE ACT)

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BILL	ING	SERVI	CES	RECEIPT

: 331012000040965 DATE : 12/11/2022 BILL No. : 331012220400038/1 NAME : KORICHERLA SRINIVA~ AGE/SEX

AGE/SEX : 49 YR/MALE DEPARTMENT: NEUROLOGY ORG. : TG EMPLOYEE HEALTH~ CREDIT NO.: GA0000552 CATEGORY : CREDIT

SERVICE : OPD MORNING REQ. DATE: 12/11/2022

S.No. DESCRIPTION	RATE (Rs.)	QTY.	TOTAL	DISC	AMT PAID	CREDIT AMT
CREDIT LETTER NO.: TG4903125						
1 (VACC) - VACCUTAINOR CHARGES	50.00	1	50.00	0.00	0.00	50.00
2 (409A)-CBC+DIFF (HB+PCV+RBC IN						
~DICES+PLT+TLC+DLC+PS)	200.00	1	200.00	0.00	0.00	200.00
3 (52A)-GLYCOSYLATED (HB A1C)	360.00	1	360.00	0.00	0.00	360.00
4 (12C) -ELECTROLYTES (NAK&CL)	160.00	1	160.00	0.00	0.00	160.00
5 (13A)-SERUM UREA	80.00	1	80.00	0.00	0.00	80.00
6 (14A)-SERUM CREATININE	80.00	1	80.00	0.00	0.00	80.00
7 (18D)-B12	440.00	1	440.00	0.00	0.00	440.00
(29C)-VITAMIN D TOTAL	1500.00	1	1500.00	0.00	0.00	1500.00
9 (24A)-LIVER FUNCTION TEST ~	440.00	1	440.00	0.00	0.00	440.00
10 (78J)-THYROID T3 T4 TSH	600.00	1	600.00	0.00	0.00	600.00
11 (11R)-RANDOM PLASMA GLUCOSE	60.00	1	60.00	0.00	0.00	60.00
TOTAL	A STATE OF	100	3970.00	0.00	0.00	3970.00

BILLED AMT 3970.00 CONCESSION AMT 0.00

AMT PAID 0.00 CREDIT AMT 3970.00

AMOUNT PAID BY PATIENT (IN WORD) : ZERO
AMOUNT PAID IN CREDIT (IN WORD) : THREE THOUSAND NINE HUNDRED SEVENTY RUPEES ONLY

NOTE : AMOUNT, PATIENT SHARE AND CREDIT SHARE ARE IN RS.

CLIENT: 3970.00 MODE OF PAYMENT: DETAILS: CLIENT : TGEHS-TELANGANA EMPLOYEE HEALTH SCHEME (TG EHS)

> (NA) AUTHORISED STGNATORY