



NIZAM'S INSTITUTE OF MEDICAL SCIENCES

(A UNIVERSITY ESTABLISHED UNDER STATE ACT)

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BILLING SERVICES RECEIPT

CR No. : 331012000040965 DATE : 12/11/2022 BILL No. : 331012220400038/1
NAME : KORICHERLA SRINIVA~ AGE/SEX : 49 YR/MALE DEPARTMENT: NEUROLOGY
CATEGORY : CREDIT ORG. : TG EMPLOYEE HEALTH~ CREDIT NO.: GA0000552
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 (NA&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
8	(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				3970.00	0.00	0.00	3970.00

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12/11/22
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.

MODE OF PAYMENT: CLIENT : 3970.00

DETAILS: CLIENT : TGEHS-TELANGANA EMPLOYEE HEALTH SCHEME (TG EHS)

A RANESH (NA)
AUTHORISED SIGNATORY