

APOLLO HOSPITALS

Discharge Summary & Final Bill

PATIENT INFORMATION

Patient Name:	John Doe	Patient ID:	P-2026-001234
Age:	45 years	Gender:	Male
Admission Date:	20-Jan-2026	Discharge Date:	25-Jan-2026
Duration:	5 days	Room Type:	Private AC

DIAGNOSIS

Primary:	Type 2 Diabetes Mellitus (E11)
Secondary:	Hypertension (I10), Diabetic Nephropathy (E11.21)
Procedure:	Medical Management & Stabilization

ITEMIZED BILL SUMMARY

S.No	Description	Days/Qty	Rate (₹)	Amount (₹)
1	Room Charges (Private AC)	5	5,000	25,000
2	ICU Charges (2 days)	2	40,000	80,000
3	Doctor Consultation Fees	-	10,000	10,000
4	Nursing & Attendant Charges	5	1,500	7,500
5	Diagnostics (HbA1c, Lipid Profile, Kidney Function)	-	8,000	8,000
6	Pharmacy (Insulin, Anti-hypertensives)	-	6,500	6,500
7	Consumables (Syringes, Gloves, Catheters)	-	4,000	4,000
8	Physiotherapy Sessions	3	3,000	9,000
TOTAL:				1,50,000

PAYMENT SUMMARY

Total Bill Amount:	■ 1,50,000
Advance Paid:	■ 30,000
Amount Due:	■ 1,20,000

Apollo Hospitals

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This is a computer-generated document. Please submit this bill to your insurance provider for reimbursement.