



BILLING SERVICE RECEIPT

Bill No : 33101254786247852/1

Bill Date: 17/03/2025

Name of Patient : K.Srinu

Address: : Yusufguda

Date/Time of Admission : 15/03/2025

Date/ Time of Discharge: 17/03/2025

Name of Treating Doctor : G.Rama Devi

Department: General

Patient ID : 12665/3

Room No.: 201

Sl. No.	Medical Charges	Unit	Quantity	Price /Unit	GST (%)	Amount
1	ICU Charges	Hour	12	500	12%	₹ 6720.00
2	Ventilator Support	Hour	10	700	12%	₹ 7840.40
3	Poison Antidote	Dose	2	2500	12%	₹ 5600.00
4	Blood Transfusion	Unit	2	3000	12%	₹ 6720.00

Sl. No.	Billing Heads	Unit	Quantity	Price /Unit	GST (%)	Amount
1	Admission Charges	One-time	1	1000	12%	₹ 1120.00
2	Room Rent (ICU)	Day	2	3000	12%	₹ 6720.40
3	Consultant Charges	Visit	2	1800	12%	₹ 4032.00
4	OT Charges	Hour	3	150	12%	₹ 504.00

				Sub Total	₹ 30536.00
Amount In Words: Thirty Thousand Rupees Only				Discount:	₹ 536.00
				Final Amount:	₹ 30000.00
				Amount Paid:	₹ 30000.00
				Balance:	₹ 0.00

Authorised Signature

