

CE Licence No
Valid Upto : 3-Aug-28

Interim Bill -Bill of Supply		From Date : 26-Oct-2025
		To Date : 19-Nov-2025
Name :	Age: - /s	UHID : -----
Father Name :	Sex:	
Address :		IP Number: ----- 
Doctor Name :	Bill No : INT2043376	
Speciality :	Date : 19-Nov-2025	Time : 13:54:38 
Ward Name :		
Bed No :		
Billing Type	Authorization No:	Admission Date : 26-Oct-2025 14:13:20 pm
TPA/Corporate(1) :		
Employer Name :		

Sl. No	Service	Amount(`)
1	Consultation(999311)	79,750.00
2	Equipment(999311)	213,250.00
3	Invasive Procedures(999311)	35,720.00
4	Investigations(999311)	173,010.00
5	Medical Records(999311)	600.00
6	Non Invasive Procedure(999311)	141,120.00
7	Nutritional and Functional Assessment Charges(999311)	600.00
8	OT Charges(999311)	115,000.00
9	OT Consumables(999311)	52,517.96
10	OT Pharmacy(999311)	2,244.37
11	Pharmacy Consumables(999311)	334,504.78
12	Physiotherapy(999311)	22,500.00
13	Professional Charges(999311)	102,500.00
14	Profile(999311)	131,170.00
15	Room Rent(999311)	235,800.00
16	Ward Pharmacy(999311)	569,475.95

Name :	IP No :	Bill No : INT2043376
Service Amount		2,209,763.00
Total Discount		0.00
Service Amount After Discount (Bill of Supply)		2,209,763.00
<u>Other Information :</u>		
Bill of Supply : INT2043376		2,209,763.00
Tax Invoice :		0.00
Total Payable Amount		2,209,763.00
Authorization Amount(1)		0.00
Deposit ()(Cash:0.00 , Non Cash:0.00)		0.00
To Pay		2,209,763.00
To be Refund		0.00
Net Payable		2,209,763.00
Payment Details:		
Interim bill amount in words : Twenty-Two Lakhs Nine Thousand Seven Hundred Sixty-Three Only		
No Tax Is Payable on Reverse Charge Basis		
	Outstanding Amount	2,209,763.00
Generated By	Cashier/Manager	
Disclaimer: This Interim Bill generated as requested by Patient for information purpose only and does not have any financial implications.		
Disclaimer: The final Bill amount may vary depending on actual consumption of services and medicines at the time of discharge.		

Name :		IP No :		Bill No : INT2043376			
Payer Payable							
SL. No	Service code	Service Name (Order No.)	Alias Code	Dr. Name	Start Date	End Date	Qty/Duration (in mins)
Consultation(999311)							
		Consultation					
1	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00
2	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00
3	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00
4	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00
5	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00
6	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00
7	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00
8	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00
9	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00
10	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00
11	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00
12	19631	IP CONSULTATION CHARGES					1.00 1,000.00 0 1,000.00