



CLAIM NO - GUR-1125-PA-0164299

FINAL BILL & DEATH SUMMARY

Bill of Supply

Note: This is running Bill and for hospital use only

GSTIN : 07AABTM0270H2ZT PAN : AABTM0270H

State : Delhi, State Code : 07

I.P. No. : AC25/16934

Original

Bill No.

: PROVISIONAL

UHID : 300141730

Run Date

: 11/11/2025 07:08

Patient Name : Mrs. MEENA JAIN

Consultant

: Dr. SS UNIT (Dr. Sushant Mittal, Dr. Samit Purohit)

Gender/Age : 69 Yrs/Female

D.O.A

: 07/11/2025 10:44

Contact No : 9711808239 ,

D.O.D

: 11/11/2025 17:55(EXPIRED)

Address : 29/23 SHAKTI NAGAR DELHINEW DELHI, New Delhi

Bed No/Ward

: ICU-9/1F-NW-ICU

Payer : VIDAL HEALTH TPA PVT LTD(CREDIT)

Billing Category

: Semi-Private

Sponsor : National Insurance Company Ltd.

Adm. Category

: Semi-Private

Doctor Team : SS UNIT(Sushant Mittal, Samit Purohit)

SAC Code

: 999311

Policy No :

Member ID

:

ID Card No : 0

Card Holder

: Self

Card Holder Name :

PAN/Form60

: 978

No. of Days : 4

Semi-Private

S#	Particulars	Code	Gross Amt	Disc Amt	Net Amt	Payer Amt
1	ADMISSION CHARGES		600.00	0.00	600.00	600.00
2	ROOM CHARGES					
	ICU (13000 X 1)		13000.00	1690.00	11310.00	11310.00
	Semi-Private (6500 X 3)		19500.00	2535.00	16965.00	16965.00
3	LABORATORY		24010.00	3121.30	20888.70	20888.70
4	Cardiology		4320.00	561.60	3758.40	3758.40
5	RADIOLOGY		17080.00	2220.40	14859.60	14859.60
6	COMMON PROCEDURE		5580.00	725.40	4854.60	4854.60
7	EQUIPMENT CHARGES		4380.00	569.40	3810.60	3810.60
8	MEDICAL GASES		2200.00	286.00	1914.00	1914.00
9	CONSULTATION		22800.00	2964.00	19836.00	19836.00
10	Gastroenterology		16560.00	2152.80	14407.20	14407.20
11	PHYSIOTHERAPY		3780.00	491.40	3288.60	3288.60
12	NUTRITION CONSULTATION		600.00	0.00	600.00	600.00
13	TPA DOCUMENT PROCESSING CHARGES		1700.00	0.00	1700.00	1700.00
14	ROUND OFF		-0.31	0.00	-0.31	-0.31
15	IP PHARMACY-BASEMENT - ACH (ISSUE)		48129.45	4812.95	43316.50	43316.50
16	IP PHARMACY-BASEMENT - ACH (RETURN)		-1792.38	-179.24	-1613.14	-1613.14
			182446.76	21951.01	160495.75	160495.75

Bill Not Settled

Gross Amount **182446.76**

6

Discount Amount(-) **21951.01**

H-2/F-2/FC-34, A-4, Paschim Vihar, New Delhi-110063

Tel.: 011-49-222-222, E-mail: ach@actioncancerhospital.com, Website: www.actioncancerhospital.com

Printed By : SB9854

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Print Date & Time : 11/11/2025 07:08 PM



GST On Room Rent(5%) **848.26**

Net Amount **161344.0**

1

Amount Received Rs.(-) **0.00**

Amount To Be Received (Rs.) **161344.00**

Net Amount In Words:(Rs.) One Lakh Sixty One Thousand Three Hundred Forty Four only .

Remarks: 13% on Total Bill Except Medicine, 2-> 10% on Medicine

Patient's/Attendant's Signature

Authorised Signatory



Kindly pay balance amount within 24hrs.. Thank you for your cooperation.

H 2/FC-34, A-4, Paschim Vihar, New Delhi-110063

Printed By: 589854

Page No: 2 of 2

Print Date & Time: 11/11/2025 07:08 PM

Tel.: 011-47222-222, E-mail: ach@actioncancerhospital.com, Website: www.actioncancerhospital.com



In-patient bill (Details)

GSTIN : 07AABTM0270H2ZT PAN : AABTM0270H Hospital Reg. No. : DGHS/NH/831

Note: This is running Bill and for hospital use only

I.P. No.	: AC25/16934	Original	Bill No.	PROVISIONAL
UHID	: 300141730		Run Date	11/11/2025 07:08 PM
Patient Name	: Mrs. MEENA JAIN		Consultant	Dr. SS UNIT (Dr. Sushant Mittal, Dr. Samit Purohit)
Gender/Age	: Female/69 Yr		Adm. Category	Semi-Private
Contact No	: 9711808239		D.O.A	07/11/2025 10:44
Address	: 29/23 SHAKTI NAGAR DELHINEW DELHI		D.O.D	11/11/2025 17:55(EXPIRED)
Payer	: VIDAL HEALTH TPA PVT LTD(CREDIT)		Bed No/Ward	ICU-9/1F-NW-ICU
Sponsor	: National Insurance Company Ltd.		Dis. Category	Semi-Private
Team Doctor	: SS UNIT(Sushant Mittal, Samit Purohit)		Member ID	
Policy No	:		Pan Card/ Form 60	978
ID Card No	: 0		Card Holder	Self
CardHolder Name	:		Insurance Co.	

Date	Particulars	Code	Rate	Qty	Amount
ADMISSION CHARGES					
07/11/2025	ADMISSION CHARGES		600.00	1	600.00
Total for ADMISSION CHARGES					600.00
BED CHARGES					
07/11/2025	Semi-Private		6500.00	1	6500.00
08/11/2025	Semi-Private		6500.00	1	6500.00
09/11/2025	Semi-Private		6500.00	1	6500.00
10/11/2025	ICU		13000.00	1	13000.00
Total for BED CHARGES					32500.00
LABORATORY					
07/11/2025	COMPLETE HEAMOGRAM WITHOUT PS/CBC		660.00	1	660.00
07/11/2025	URINE ROUTINE & MICROSCOPY		180.00	1	180.00
07/11/2025	AEROBIC CULTURE URINE		1090.00	1	1090.00
07/11/2025	RENAL FUNCTION TEST(KFT - BASIC)		1340.00	1	1340.00
07/11/2025	HEPATIC PROFILE (LFT) WITHOUT GGT		1200.00	1	1200.00
07/11/2025	PT(PROTHROMBIN TIME)		560.00	1	560.00
07/11/2025	HBSAg		780.00	1	780.00
07/11/2025	HCV		2380.00	1	2380.00
07/11/2025	HEPATITIS A IGM (HAV IGM)		1890.00	1	1890.00
07/11/2025	HEPATITIS E IGM (ANTI HEV IGM)		2550.00	1	2550.00
08/11/2025	RENAL FUNCTION TEST(KFT - BASIC)		1340.00	1	1340.00
08/11/2025	ABG (ARTERIAL BLOOD GAS ANALYSIS)		1290.00	1	1290.00
09/11/2025	COMPLETE HEAMOGRAM WITHOUT PS/CBC		660.00	1	660.00
09/11/2025	RENAL FUNCTION TEST(KFT - BASIC)		1340.00	1	1340.00
09/11/2025	HIV I & II ANTIBODY (INCLUDING P24 ANTIGEN)		780.00	1	780.00
10/11/2025	COMPLETE HEAMOGRAM WITHOUT PS/CBC		660.00	1	660.00
10/11/2025	ABG (ARTERIAL BLOOD GAS ANALYSIS)		1290.00	1	1290.00



I.P. No.	: AC25/16934	UHID	: 300141730	Patient Name	: Mrs. MEENA JAIN	Bill No.	: PROVISIONAL
10/11/2025	PT(PROTHROMBIN TIME)	560.00	1	560.00			
10/11/2025	APTT/PTTK (ACTIVATED PARTIAL THROMBOPLASTIC TIME)	780.00	1	780.00			
10/11/2025	RENAL FUNCTION TEST(KFT - BASIC)	1340.00	1	1340.00			
11/11/2025	RENAL FUNCTION TEST(KFT - BASIC)	1340.00	1	1340.00			
				Total for LABORATORY		24010.00	
Cardiology							
10/11/2025	2D ECHO (Dr. Cardio Onco AS)	4320.00	1	4320.00			
				Total for Cardiology		4320.00	
RADIOLOGY							
07/11/2025	PVR	1080.00	1	1080.00			
07/11/2025	CT KUB	6170.00	1	6170.00			
07/11/2025	MRI MRCP	9830.00	1	9830.00			
				Total for RADIOLOGY		17080.00	
COMMON PROCEDURE							
11/11/2025	Resuscitation Charges (Dr. CC Unit)	2500.00	1	2500.00			
11/11/2025	Endotracheal Intubation (Dr. CC Unit)	3080.00	1	3080.00			
				Total for COMMON PROCEDURE		5580.00	
CONSULTATION							
Dr. Anesthesiaiach (Dr. Arun Chakladhar, Dr. Sujeet Kaur)							
08/11/2025	FIRST VISIT (Dr. Anesthesiaiach)	1200.00	1	1200.00			
				Total of Dr. Anesthesiaiach (Dr. Arun Chakladhar, Dr. Sujeet Kaur)		1200.00	
Dr. CC Unit (Dr. Yogesh Kumar Swarnkar)							
11/11/2025	FIRST VISIT (Dr. CC Unit)	1200.00	1	1200.00			
				Total of Dr. CC Unit (Dr. Yogesh Kumar Swarnkar)		1200.00	
Dr. Gastro MG (Dr. Monika Jain, Dr. Gurwant S Lamba)							
07/11/2025	FIRST VISIT (Dr. Gastro MG)	1200.00	1	1200.00			
08/11/2025	FIRST VISIT (Dr. Gastro MG)	1200.00	1	1200.00			
10/11/2025	FIRST VISIT (Dr. Gastro MG)	1200.00	1	1200.00			
11/11/2025	FIRST VISIT (Dr. Gastro MG)	1200.00	1	1200.00			
				Total of Dr. Gastro MG (Dr. Monika Jain, Dr. Gurwant S Lamba)		4800.00	
Dr. Nephrology II (Dr. Rajesh Aggarwal)							
08/11/2025	FIRST VISIT (Dr. Nephrology II)	1200.00	1	1200.00			
09/11/2025	FIRST VISIT (Dr. Nephrology II)	1200.00	1	1200.00			
				Total of Dr. Nephrology II (Dr. Rajesh Aggarwal)		2400.00	
Dr. SS UNIT (Dr. Sushant Mittal, Dr. Samit Purohit)							
07/11/2025	FIRST VISIT (Dr. SS UNIT)	1200.00	1	1200.00			
07/11/2025	SECOND VISIT (Dr. SS UNIT)	1200.00	1	1200.00			
08/11/2025	FIRST VISIT (Dr. SS UNIT)	1200.00	1	1200.00			
08/11/2025	SECOND VISIT (Dr. SS UNIT)	1200.00	1	1200.00			
09/11/2025	FIRST VISIT (Dr. SS UNIT)	1200.00	1	1200.00			
10/11/2025	FIRST VISIT (Dr. SS UNIT)	1200.00	1	1200.00			
10/11/2025	SECOND VISIT (Dr. SS UNIT)	1200.00	1	1200.00			
11/11/2025	FIRST VISIT (Dr. SS UNIT)	1200.00	1	1200.00			
11/11/2025	SECOND VISIT (Dr. SS UNIT)	1200.00	1	1200.00			



I.P. No. : AC25/16934 UHID : 300141730 Patient Name : Mrs. MEENA JAIN Bill No. : PROVISIONAL

Total of Dr. SS UNIT (Dr. Sushant Mittal, Dr. Samit Purohit)

10800.00

Uro 1 AG (Dr. Atul Goswami, Dr. Saurabh Mittal, Dr. Mayank Garg)

07/11/2025	FIRST VISIT (Uro 1 AG)	1200.00	1	1200.00
08/11/2025	FIRST VISIT (Uro 1 AG)	1200.00	1	1200.00

Total of Uro 1 AG (Dr. Atul Goswami, Dr. Saurabh Mittal, Dr. Mayank Garg)

2400.00

Total for CONSULTATION

22800.00

NUTRITION CONSULTATION

07/11/2025	NUTRITION CONSULTATION	600.00	1	600.00
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Total for NUTRITION CONSULTATION

600.00

TPA DOCUMENT PROCESSING CHARGES

07/11/2025	TPA DOCUMENT PROCESSING CHARGES	1700.00	1	1700.00
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Total for TPA DOCUMENT PROCESSING CHARGES

1700.00

PHYSIOTHERAPY

08/11/2025	Chest Physiotherapy	630.00	1	630.00
09/11/2025	Chest Physiotherapy	630.00	1	630.00
09/11/2025	Chest Physiotherapy	630.00	1	630.00
10/11/2025	Chest Physiotherapy	630.00	2	1260.00
11/11/2025	Chest Physiotherapy	630.00	1	630.00

Total for PHYSIOTHERAPY

3780.00

Gastroenterology

10/11/2025	UGI Endoscopy (Procedure) (Dr. Gastro MG)	5830.00	1	5830.00
10/11/2025	Endoscopic R/T Placement_(Procedure) (Dr. Gastro MG)	10730.00	1	10730.00

Total for Gastroenterology

16560.00

EQUIPMENT CHARGES

11/11/2025	Ventilator	4380.00	1	4380.00
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Total for EQUIPMENT CHARGES

4380.00

MEDICAL GASES

11/11/2025	Oxygen	2200.00	1	2200.00
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Total for MEDICAL GASES

2200.00

ROUND OFF

11/11/2025	ROUND OFF	-0.31	1	-0.31
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Total for ROUND OFF

-0.31

IP PHARMACY-BASEMENT - ACH (ISSUE)

07/11/2025 12:26	GFH - HEPA TAB (10"S), MITIS	43.69	5.00	218.45
07/11/2025 12:26	HEPTRAL 400 MG TAB	145.75	5.00	728.75
07/11/2025 12:26	IV INFUSION TRANS FLOW-FLOVI, MEDIKIT	383.44	1.00	383.44
07/11/2025 12:26	LOOZ SYP 240ML	315.00	1.00	315.00
07/11/2025 12:26	NS 100 ML EUROHEAD, DENIS	44.90	4.00	179.60
07/11/2025 12:26	NS 500ML AQUA PLUS, DENIS	93.90	2.00	187.80



I.P. No.	: AC25/16934	UHID	: 300141730	Patient Name	: Mrs. MEENA JAIN	Bill No.	: PROVISIONAL
07/11/2025 12:26	ONDAWEM(ONDANSETRON) INJ 4ML 1X1-WEMBRACE			25.03	3.00	75.09	
07/11/2025 12:26	PARIDEM 40MG INJ. EMCURE			53.87	2.00	107.74	
07/11/2025 12:26	RELIDERM IV WINDOW FRAME (7X9CM) W0709, GHC			213.75	1.00	213.75	
07/11/2025 12:26	SYRINGE 10ML + NEEDLE (21X1.5), NIPRO			25.78	5.00	128.90	
07/11/2025 12:26	VENFLON-I 22G, B.D			321.00	1.00	321.00	
07/11/2025 13:39	KABILYTE 500ML INJ			353.00	2.00	706.00	
07/11/2025 13:39	NODOSIS TAB 500MG 15""S, STEADFAST			3.56	5.00	17.80	
07/11/2025 15:47	NS 500ML AQUA PLUS, DENIS			93.90	1.00	93.90	
07/11/2025 15:47	RASCASE 1.5MG INJ_##HR			10890.00	2.00	21780.00	
07/11/2025 20:33	SMARTSITE STANDALONE (2000E7D), BD			288.50	1.00	288.50	
08/11/2025 11:29	DNS 500ML AQUA PLUS, DENIS			91.31	1.00	91.31	
08/11/2025 11:29	KABILYTE 500ML INJ			353.00	2.00	706.00	
08/11/2025 11:29	ONDAWEM(ONDANSETRON) INJ 2ML 1X1-WEMBRACE			12.52	2.00	25.04	
08/11/2025 11:29	ONDAWEM(ONDANSETRON) INJ 2ML 1X1-WEMBRACE			12.52	1.00	12.52	
08/11/2025 11:29	PARIDEM 40MG INJ. EMCURE			53.87	2.00	107.74	
08/11/2025 11:29	SYRINGE 10ML + NEEDLE (21X1.5), NIPRO			25.78	6.00	154.68	
08/11/2025 14:10	DROTIKIND INJ 2ML,MANKIND			36.13	1.00	36.13	
08/11/2025 14:10	PARIDEM 40MG INJ. EMCURE			53.87	1.00	53.87	
08/11/2025 17:07	BUNASE (BUDESONIDE) 0.5MG RESPULES 1X5-MACLEODS			25.42	3.00	76.26	
08/11/2025 17:07	IPRAZEST RESPULES (1.25 + 500) MG, MACLEODS			24.94	3.00	74.82	
08/11/2025 17:07	NEBULIZER MASK ADULT (MEDIMIST), MEDIKIT			738.75	1.00	738.75	
08/11/2025 17:07	REOKAY INJ. 1ML			6.00	2.00	12.00	
08/11/2025 17:07	RESPIROMETER(GS-6018)ROMSONS			873.75	1.00	873.75	
08/11/2025 20:13	RELIDERM IV WINDOW FRAME (7X9CM) W0709, GHC			213.75	1.00	213.75	
08/11/2025 20:13	VENFLON-I 22G, B.D			321.00	1.00	321.00	



I.P. No.	: AC25/16934	UHID	: 300141730	Patient Name	: Mrs. MEENA JAIN	Bill No.	: PROVISIONAL
09/11/2025 11:36	BUNASE (BUDESONIDE) 0.5MG RESPULES 1X5- MACLEODS			25.42	3.00	76.26	
09/11/2025 11:36	HEPTRAL 400 MG TAB			145.75	6.00	874.50	
09/11/2025 11:36	IPRAZEST RESPULES (1.25 + 500) MG, MACLEODS			24.94	3.00	74.82	
09/11/2025 11:36	NODOSIS TAB 500MG 15""S, STEADFAST			3.56	6.00	21.36	
09/11/2025 11:36	NS 100 ML EUROHEAD, DENIS			44.90	3.00	134.70	
09/11/2025 11:36	ONDAWEM(ONDANSETRON) INJ 4ML 1X1-WEMBRACE			25.03	3.00	75.09	
09/11/2025 11:36	PARIDEM 40MG INJ. EMCURE			53.87	2.00	107.74	
09/11/2025 11:36	SMARTSITE SINGLE EXTENSION, BD			394.50	1.00	394.50	
09/11/2025 11:36	SUPRIDOL INJ 1ML 50MG			13.18	2.00	26.36	
09/11/2025 11:36	SYRINGE 10ML + NEEDLE (21X1.5), NIPRO			25.78	8.00	206.24	
09/11/2025 11:36	UDILIV TAB 300MG			61.60	6.00	369.60	
09/11/2025 17:37	NODOSIS TAB 500MG 15""S, STEADFAST			3.56	6.00	21.36	
09/11/2025 19:03	RELIDERM IV WINDOW FRAME (7X9CM) W0709, GHC			213.75	1.00	213.75	
09/11/2025 19:03	VENFLON-I 22G, B.D			321.00	2.00	642.00	
10/11/2025 12:28	BUNASE (BUDESONIDE) 0.5MG RESPULES 1X5- MACLEODS			25.42	3.00	76.26	
10/11/2025 12:28	IPRAZEST RESPULES (1.25 + 500) MG, MACLEODS			24.94	3.00	74.82	
10/11/2025 12:28	ONDAWEM(ONDANSETRON) INJ 4ML 1X1-WEMBRACE			25.03	5.00	125.15	
10/11/2025 12:28	PARIDEM 40MG INJ. EMCURE			53.87	2.00	107.74	
10/11/2025 12:28	REOKAY INJ. 1ML			6.00	1.00	6.00	
10/11/2025 12:28	SYRINGE 10ML + NEEDLE (21X1.5), NIPRO			25.78	4.00	103.12	
10/11/2025 12:28	SYRINGE 5ML + NEEDLE (24X1), NIPRO			19.50	2.00	39.00	
10/11/2025 16:38	6IPZOCIN 1ML INJ,6IPAIN_#HR			64.69	1.00	64.69	
10/11/2025 16:38	BUSCOGAST 20MG INJ_@LA			12.00	2.00	24.00	
10/11/2025 16:38	IV INFUSION TRANS FLOW-FLOVI, MEDIKIT			383.44	1.00	383.44	
10/11/2025 16:38	NS 500ML AQUA PLUS, DENIS			93.94	3.00	281.82	



I.P. No.	: AC25/16934	UHID	: 300141730	Patient Name	: Mrs. MEENA JAIN	Bill No.	: PROVISIONAL
10/11/2025 16:38	OXY TWIN BORE ADULT (MEDIWIN)-MEDIKIT			381.56	1.00	381.56	
10/11/2025 16:38	RYLE S TUBE (MEDIRYLES) NO-18-MEDIKIT			127.50	1.00	127.50	
10/11/2025 16:38	SUCTION CATHETER PLAIN FG-10(GS-2006)ROMSONS			75.94	1.00	75.94	
10/11/2025 16:38	URO BAG ADULT (URO-DYNE) DB-1097, ROMSONS			395.00	1.00	395.00	
10/11/2025 18:33	MCT-ROFF INJ 1% 20ML			136.41	1.00	136.41	
10/11/2025 19:35	NS 500ML AQUA PLUS, DENIS			93.94	1.00	93.94	
11/11/2025 11:31	6IPZOCIN 1ML INJ,6IPAIN_##HR			64.69	1.00	64.69	
11/11/2025 11:31	BUSCOGAST 20MG INJ_@@LA			12.00	1.00	12.00	
11/11/2025 11:31	BUSCOGAST 20MG INJ_@@LA			12.00	1.00	12.00	
11/11/2025 11:31	IV INFUSION TRANS FLOW-FLOVI, MEDIKIT			383.44	1.00	383.44	
11/11/2025 11:31	NS 500ML AQUA PLUS, DENIS			93.94	1.00	93.94	
11/11/2025 11:31	NS 500ML AQUA PLUS, DENIS			93.90	2.00	187.80	
11/11/2025 11:31	OXYGEN FACE MASK ADULT (MEDI-O-MASK), MEDIKIT			468.00	1.00	468.00	
11/11/2025 11:31	RYLE S TUBE (MEDIRYLES) NO-18-MEDIKIT			127.50	1.00	127.50	
11/11/2025 11:31	SUCTION CATHETER PLAIN FG-14, MEDIKIT			101.25	1.00	101.25	
11/11/2025 11:31	URO BAG ADULT (URO-DYNE) DB-1097, ROMSONS			395.00	1.00	395.00	
11/11/2025 12:18	KABILYTE 500ML INJ			353.00	1.00	353.00	
11/11/2025 12:18	NS 500ML AQUA PLUS, DENIS			93.90	3.00	281.70	
11/11/2025 12:18	ONDAWEM(ONDANSETRON) INJ 4ML 1X1-WEMBRACE			25.03	4.00	100.12	
11/11/2025 12:18	PARIDEM 40MG INJ. EMCURE			53.87	2.00	107.74	
11/11/2025 12:18	SYRINGE 10ML + NEEDLE (21X1.5), NIPRO			25.78	5.00	128.90	
11/11/2025 14:36	RELIDERM IV WINDOW FRAME (7X9CM) W0709, GHC			195.00	1.00	195.00	
11/11/2025 17:31	ADNALINE (ADRENALINE) INJ 1ML 1X1-QUESTUS			13.05	13.00	169.65	
11/11/2025 17:31	BACTERIA VIRAL FILTER, MEDISAFE			515.63	1.00	515.63	
11/11/2025 17:31	BANDAGE 10 CM X 4 MTRS			23.44	2.00	46.88	



I.P. No.	: AC25/16934	UHID	: 300141730	Patient Name	: Mrs. MEENA JAIN	Bill No.	: PROVISIONAL
11/11/2025 17:31	CATHETER MOUNT, POLYMED			521.00	1.00	521.00	
11/11/2025 17:31	CLOSED SUCTION SYSTEM 14FR (ICSM14), TUOREN			2390.63	1.00	2390.63	
11/11/2025 17:31	ECG ELECTRODE ADULT (SOLID GEL) MSGLT-36, MEDICO			33.75	10.00	337.50	
11/11/2025 17:31	ENDOTRACHEAL TUBE CUFFED 7.5MM, ROMSONS			399.00	1.00	399.00	
11/11/2025 17:31	IV INFUSION TRANS FLOW-FLOVI, MEDIKIT			383.44	3.00	1150.32	
11/11/2025 17:31	NORAD 2ML INJ, NEON_##HR			43.06	4.00	172.24	
11/11/2025 17:31	NS 500ML AQUA PLUS, DENIS			93.94	2.00	187.88	
11/11/2025 17:31	OXYGEN FACE MASK ADULT (MEDI-O-MASK), MEDIKIT			468.00	1.00	468.00	
11/11/2025 17:31	PM-O-LINE M-F 150CM (MEDIVEINS ALPHA)-MEDIKIT			440.63	1.00	440.63	
11/11/2025 17:31	RINGER LACTATE 500ML (DENIS) AQUA			69.39	3.00	208.17	
11/11/2025 17:31	STOVISOD (SODIM BICARBONATE) INJ 25ML - QUESTUS			35.96	4.00	143.84	
11/11/2025 17:31	SYRINGE 10ML + NEEDLE (21X1.5), NIPRO			25.78	2.00	51.56	
11/11/2025 17:31	SYRINGE 5ML + NEEDLE (24X1), NIPRO			19.69	1.00	19.69	
11/11/2025 17:31	TROPINE INJ IML _@@LA			7.18	8.00	57.44	
11/11/2025 17:49	LIMB-O SINGLE LIMB ANESTHESIA BREATHING CIRCUIT GE			2859.30	1.00	2859.30	
Total for IP PHARMACY-BASEMENT - ACH (ISSUE)						48129.45	
IP PHARMACY-BASEMENT - ACH (RETURN)							
09/11/2025 23:12	NS 100 ML EUROHEAD, DENIS			44.90	4.00	-179.60	
09/11/2025 23:12	NS 100 ML EUROHEAD, DENIS			44.90	3.00	-134.70	
11/11/2025 17:51	DNS 500ML AQUA PLUS, DENIS			91.31	1.00	-91.31	
11/11/2025 17:51	NS 500ML AQUA PLUS, DENIS			93.94	2.00	-187.88	
11/11/2025 17:51	PARIDEM 40MG INJ. EMCURE			53.87	2.00	-107.74	
11/11/2025 17:51	KABILYTE 500ML INJ			353.00	1.00	-353.00	
11/11/2025 17:51	SYRINGE 10ML + NEEDLE (21X1.5), NIPRO			25.78	8.00	-206.24	
11/11/2025 17:51	SYRINGE 10ML + NEEDLE (21X1.5), NIPRO			25.78	5.00	-128.90	
11/11/2025 17:51	ONDAWEM(ONDANSETRON) INJ 4ML 1X1-WEMBRACE			25.03	5.00	-125.15	



I.P. No. : AC25/16934	UHID : 300141730	Patient Name : Mrs. MEENA JAIN	Bill No. : PROVISIONAL
11/11/2025 17:51	ONDAWEM(ONDANSETRON) INJ 4ML 1X1-WEMBRACE	25.03 2.00	-50.06
11/11/2025 17:51	IPRAZEST RESPULES (1.25 + 500) MG, MACLEODS	24.94 3.00	-74.82
11/11/2025 17:51	IPRAZEST RESPULES (1.25 + 500) MG, MACLEODS	24.94 1.00	-24.94
11/11/2025 17:51	BUNASE (BUDESONIDE) 0.5MG RESPULES 1X5-MACLEODS	25.42 3.00	-76.26
11/11/2025 17:51	BUNASE (BUDESONIDE) 0.5MG RESPULES 1X5-MACLEODS	25.42 1.00	-25.42
11/11/2025 17:51	SUPRIDOL INJ 1ML 50MG	13.18 2.00	-26.36
Total for IP PHARMACY-BASEMENT - ACH (RETURN)			-1792.38
Bill Not Settled	Total Amount	182446.76	
	Discount Amount (-)	21951.01	
	GST On Room Rent (5%)	848.26	
	Net Amount	161344.01	
	Net Amount (Incl. Tax)	161344.00	
	Amount Received Rs. (-)	0.00	
	Amount To Be Received (Rs.)	161344.00	

Remarks: 13% on Total Bill Except Medicine, 2-> 10% on Medicine

Patient's /Attendant's Signature

Authorised Signatory





Name : Mrs. MEENA JAIN 69 Y/F
 UHID : 300141730 IP No : AC25/16934
 Room/Ward : ICU-9 / 1F-NW-ICU
 DOA/TOA : 07/11/2025--10:44/Semi-Private
 Org Name : VIDAL HEALTH TPA PVT LTD(CREDIT)
 Unit/Cons : Dr. SS UNIT

Death Summary

Diagnosis - Carcinoma Cervix, Advanced Disease
 with Jaundice with Acute Kidney Injury

Cause of Death - Carcinoma Cervix Advanced Disease
 with Jaundice with AKI with Respiratory failure
 And Shock

Case Summary - Mrs Meena Jain 69 yrs female known
 Hypertensive with Diabetic female Admitted for
 Suppurative Cervix. Neohydrocot. Refractive taken for
 B/L Hydronephrosis & Urinary. Urinary Refractive
 done for B/L Hydronephrosis. Late patient. Plan for
 D.S. Stenting. Crystalline Refractive taken for Jaundice
 Advised for ERCP + Biliary + Duodenal stent placement
 Completion of Procedure Explained in Detail.
 On Day (11.11.2025) Procedure 'patient developed
 Sudden hypotension Bradycardia and Became
 Unresponsive. ACLS Protocol done despite $> \frac{1}{2}$ hr
 CPR patient could not revived back & Declared
 Expired at 5.55pm by evidence of flat line
 ECG on Dated 11.11.2025.



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