

Apollo Specialty Hospital

45, MG Road, Bengaluru - 560001, Karnataka, India

Ph: 080-40505050 | Fax: 080-40505051 | Email: billing@apollospecialty.com

GSTIN: 29AAACS1234G1Z6 | Hospital Registration No: KA/BLR/2003/67890

FINAL HOSPITAL BILL

(FOR INSURANCE PURPOSES)

Bill No: ASH/BLR/2025/011567	Date: 15/10/2025	
Patient ID: ASH2025011567	Time: 14:00 hrs	

PATIENT INFORMATION

Patient Name:	Priya Sharma
Age/Gender:	42 Years / Female
Address:	67, Indiranagar, Bangalore - 560038
Contact Number:	+91-9845123456
Email:	priya.sharma@email.com

INSURANCE INFORMATION

TPA Name:	HDFC ERGO Health Insurance TPA
Policy Number:	HDFC/OPT/2022/123456
Authorization Number:	AUTH-2025-89012
Authorized Amount:	₹ 110,000.00

ADMISSION DETAILS

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Date of Admission:	10/10/2025
Date of Discharge:	15/10/2025
Total Days:	5 Days
Room Type:	Single Private AC Room
Treating Consultant:	Dr. Rajesh Malhotra (MS General Surgery, FMAS)
Department:	General & Laparoscopic Surgery
Admission Type:	Planned/Elective

DIAGNOSIS & PROCEDURE

Primary Diagnosis:	Symptomatic Cholelithiasis with Common Bile Duct Stone (Intraoperative Finding)
ICD-10 Code:	K80.5
Procedure Performed:	Laparoscopic Cholecystectomy with Laparoscopic Common Bile Duct Exploration and T-tube Insertion
ICD-10 PCS Code:	0FT44ZZ + 0FC98ZZ
Complication (if any):	Intraoperative finding: Common bile duct stone (12mm) identified during surgery, required additional CBDE procedure

ITEMIZED BILL DETAILS

Sr.	Description	Qty	Rate (₹)	Amount (₹)
A.	ROOM & BOARDING CHARGES			
1	Room Rent - Single AC (10-15 Oct)	5	5,000.00	25,000.00

2	Nursing Charges	5	800.00	4,000.00
3	Patient Diet	10	200.00	2,000.00
4	Service Charges	5	400.00	2,000.00
	Sub-Total A			33,000.00
B.	CONSULTATION & PROFESSIONAL FEES			
5	Surgeon's Fee (Dr. Rajesh Malhotra) - Cholecystectomy	1	25,000.00	25,000.00
6	Surgeon's Fee - Additional CBDE Procedure	1	18,000.00	18,000.00
7	Anesthetist's Fee (Extended Duration)	1	12,000.00	12,000.00
8	Post-op Consultation Charges	4	800.00	3,200.00
9	Pre-Anesthetic Consultation	1	1,500.00	1,500.00
	Sub-Total B			59,700.00
C.	OPERATION THEATRE CHARGES			
10	OT Charges (Complex Laparoscopic Procedure)	1	28,000.00	28,000.00
11	OT Extended Time (Additional 90 minutes)	1	8,000.00	8,000.00
12	OT Consumables & Supplies	1	3,500.00	3,500.00
13	Surgical Instruments Usage	1	1,500.00	1,500.00
14	Laparoscopic Equipment Usage	1	5,000.00	5,000.00
	Sub-Total C			46,000.00

D.	PHARMACY & CONSUMABLES			
15	Inj. Ceftriaxone 1g (IV)	10	180.00	1,800.00
16	Inj. Metronidazole 500mg (IV)	15	120.00	1,800.00
17	Inj. Pantoprazole 40mg (IV)	10	80.00	800.00
18	Inj. Analgesics (IV)	12	150.00	1,800.00
19	IV Fluids (RL, DNS, NS)	15	120.00	1,800.00
20	Oral Antibiotics (Discharge)	1	950.00	950.00
21	Surgical Consumables (drapes, gloves, sutures)	1	3,500.00	3,500.00
22	Syringes, Cannula, IV Sets	1	1,500.00	1,500.00
23	T-tube & Drainage System	1	3,500.00	3,500.00
24	Wound Care & Dressing Material	1	1,200.00	1,200.00
25	Bile Bag & Accessories	1	850.00	850.00
	Sub-Total D			19,500.00
E.	IMPLANTS			
	Sub-Total E			0.00
F.	INVESTIGATIONS & DIAGNOSTICS			
26	Complete Blood Count (CBC)	3	400.00	1,200.00
27	Liver Function Tests	2	800.00	1,600.00

28	Renal Function Tests	1	700.00	700.00
29	Serum Electrolytes	1	600.00	600.00
30	Serum Bilirubin (Total & Direct)	2	500.00	1,000.00
31	Serum Amylase & Lipase	1	900.00	900.00
32	Intraoperative Cholangiogram	1	3,500.00	3,500.00
33	Post-op X-ray Abdomen	2	500.00	1,000.00
34	USG Abdomen (Follow-up)	1	1,500.00	1,500.00
35	T-tube Cholangiogram	1	2,500.00	2,500.00
36	Other Lab Tests	1	1,500.00	1,500.00
	Sub-Total F			16,000.00
G.	OTHER CHARGES			
37	Hospital Registration Charges	1	300.00	300.00
38	Medical Records Fee	1	200.00	200.00
39	Bio-medical Waste Disposal	1	500.00	500.00
40	Administrative Charges	1	1,800.00	1,800.00
	Sub-Total G			2,800.00
	TOTAL BILL AMOUNT			177,000.00
	Less: Discount			0.00

	GROSS BILL AMOUNT			177,000.00
	Add: GST @ 5%			0.00
	NET PAYABLE AMOUNT			177,000.00

PAYMENT DETAILS

Mode of Payment:	Insurance + Patient
Amount Paid by Patient:	₹ 67,000.00 (Receipt No: RC/89012/2025)
Amount Claimed from TPA:	₹ 110,000.00
Balance Due:	₹ 0.00

PAYMENT BREAKDOWN EXPLANATION

1. **Total Net Bill Amount:** ₹ 177,000.00
2. **TPA Authorized Amount:** ₹ 110,000.00
3. **Patient Responsibility (Paid):** ₹ 67,000.00

Reason for patient payment:

- Additional CBDE procedure not in original pre-authorization (surgeon fee + extended OT time): Rs.34,000
- Extended hospital stay (2 additional days for T-tube monitoring): Rs.13,200
- Intraoperative cholangiogram and T-tube cholangiogram: Rs.6,000
- T-tube insertion and drainage system: Rs.4,350
- Extended anesthesia and additional medications: Rs.5,600
- Additional investigations (bilirubin, amylase, lipase, follow-up imaging): Rs.3,850

HOSPITAL SEAL & SIGNATURE

Billing Officer

(Authorized Signatory)

Medical Director

[HOSPITAL SEAL HERE]

IMPORTANT NOTES:

1. This is a computer-generated bill and requires hospital seal and signature for insurance claims.
2. Original bill must be submitted to TPA/Insurance company.
3. All amounts are in Indian Rupees (Rs).
4. For billing queries, contact within 7 days of discharge.
5. Additional procedure (CBDE) was medically necessary due to intraoperative finding of CBD stone - documented in discharge summary.

Thank you for choosing Apollo Specialty Hospital