

**Manipal Hospital Bangalore**

98, HAL Airport Road, Bengaluru - 560017, Karnataka, India

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GSTIN: 29AAMH1234H1Z7 | Hospital Registration No: KA/BLR/2001/45678

**FINAL HOSPITAL BILL**

**(FOR INSURANCE PURPOSES)**

<b>Bill No:</b> MAN/BLR/2025/012890	<b>Date:</b> 17/10/2025	
<b>Patient ID:</b> MAN2025012890	<b>Time:</b> 15:00 hrs	

**PATIENT INFORMATION**

<b>Patient Name:</b>	Sudha Rao
<b>Age/Gender:</b>	65 Years / Female
<b>Address:</b>	45, Koramangala, Bangalore - 560034
<b>Contact Number:</b>	+91-9845678901
<b>Email:</b>	sudha.rao@email.com

**INSURANCE INFORMATION**

<b>TPA Name:</b>	Star Health Insurance TPA Ltd.
<b>Policy Number:</b>	STAR/COMP/2021/567890
<b>Authorization Number:</b>	AUTH-2025-90123
<b>Authorized Amount:</b>	₹ 275,000.00

**ADMISSION DETAILS**

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Date of Admission:	10/10/2025
Date of Discharge:	17/10/2025
Total Days:	7 Days
Room Type:	Single Private AC Room
Treating Consultant:	Dr. Arvind Kumar (MS Ortho, DNB, Fellowship Joint Replacement)
Department:	Orthopaedic Surgery - Joint Replacement
Admission Type:	Planned/Elective

**DIAGNOSIS & PROCEDURE**

Primary Diagnosis:	Severe Osteoarthritis Left Knee (Kellgren-Lawrence Grade IV) in Type 2 Diabetic Patient
ICD-10 Code:	M17.1
Procedure Performed:	Left Total Knee Replacement (Cemented, Posterior Stabilized) with Computer Navigation
ICD-10 PCS Code:	0SRC0JZ
Complication (if any):	Post-operative anemia requiring 2 units PRBC transfusion on Day 2. Perioperative blood sugar management required due to diabetes.

**ITEMIZED BILL DETAILS**

Sr.	Description	Qty	Rate (₹)	Amount (₹)
A.	ROOM & BOARDING CHARGES			
1	Room Rent - Single AC (10-17 Oct)	7	6,000.00	42,000.00

2	Nursing Charges	7	1,000.00	7,000.00
3	Patient Diet (Diabetic)	14	250.00	3,500.00
4	Service Charges	7	500.00	3,500.00
	<b>Sub-Total A</b>			<b>56,000.00</b>
<b>B.</b>	<b>CONSULTATION &amp; PROFESSIONAL FEES</b>			
5	Surgeon's Fee (Dr. Arvind Kumar)	1	60,000.00	60,000.00
6	Anesthetist's Fee	1	15,000.00	15,000.00
7	Pre-Anesthetic Consultation	1	2,000.00	2,000.00
8	Post-op Consultation Charges	6	1,000.00	6,000.00
9	Physician Consultation (Diabetes Management)	3	1,500.00	4,500.00
10	Physiotherapy Sessions (In-patient)	6	800.00	4,800.00
	<b>Sub-Total B</b>			<b>92,300.00</b>
<b>C.</b>	<b>OPERATION THEATRE CHARGES</b>			
11	OT Charges (Major Joint Replacement)	1	55,000.00	55,000.00
12	Computer Navigation System Usage	1	15,000.00	15,000.00
13	OT Consumables & Supplies	1	5,000.00	5,000.00
14	Surgical Instruments Usage	1	2,000.00	2,000.00
15	Tourniquet & Specialized Equipment	1	3,000.00	3,000.00

	<b>Sub-Total C</b>			<b>80,000.00</b>
<b>D.</b>	<b>PHARMACY &amp; CONSUMABLES</b>			
16	Inj. Ceftriaxone 1g (IV)	14	180.00	2,520.00
17	Inj. Tranexamic Acid 500mg (IV)	6	250.00	1,500.00
18	Inj. Pantoprazole 40mg (IV)	14	80.00	1,120.00
19	Inj. Analgesics (IV)	18	200.00	3,600.00
20	IV Fluids (RL, DNS, NS)	20	120.00	2,400.00
21	Inj. Enoxaparin 40mg (DVT Prophylaxis)	10	450.00	4,500.00
22	Inj. Insulin (Blood Sugar Management)	1	2,800.00	2,800.00
23	Blood Transfusion (2 Units PRBC)	2	2,500.00	5,000.00
24	Blood Processing & Cross-matching	1	1,800.00	1,800.00
25	Oral Medications (Discharge)	1	3,500.00	3,500.00
26	Surgical Consumables (drapes, gloves, sutures)	1	4,500.00	4,500.00
27	Syringes, Cannula, IV Sets	1	2,000.00	2,000.00
28	Surgical Drain & Dressing Material	1	2,500.00	2,500.00
29	Wound Care Supplies	1	1,500.00	1,500.00
30	Compression Stockings (TED)	1	1,200.00	1,200.00
	<b>Sub-Total D</b>			<b>40,440.00</b>

<b>E.</b>	<b>IMPLANTS</b>			
31	Knee Prosthesis - Posterior Stabilized (Cemented) - Femoral, Tibial, Patellar Components - Batch No: TKR2025-8901	1	42,000.00	42,000.00
32	Bone Cement (2 packs)	2	2,500.00	5,000.00
	<b>Sub-Total E</b>			<b>47,000.00</b>
<b>F.</b>	<b>INVESTIGATIONS &amp; DIAGNOSTICS</b>			
33	Complete Blood Count (CBC)	5	400.00	2,000.00
34	Blood Sugar Monitoring (Multiple)	12	150.00	1,800.00
35	HbA1c	1	600.00	600.00
36	Renal Function Tests	2	700.00	1,400.00
37	Serum Electrolytes	2	600.00	1,200.00
38	Liver Function Tests	1	800.00	800.00
39	Coagulation Profile (PT/INR, APTT)	2	700.00	1,400.00
40	X-ray Left Knee (Post-op AP & Lateral)	3	600.00	1,800.00
41	X-ray Chest PA View	1	500.00	500.00
42	ECG	2	300.00	600.00
43	2D Echocardiography	1	2,500.00	2,500.00
44	Blood Grouping & Typing	1	400.00	400.00

45	Other Lab Tests	1	2,000.00	2,000.00
	<b>Sub-Total F</b>			<b>17,000.00</b>
<b>G.</b>	<b>OTHER CHARGES</b>			
46	Hospital Registration Charges	1	500.00	500.00
47	Medical Records Fee	1	300.00	300.00
48	Bio-medical Waste Disposal	1	600.00	600.00
49	Administrative Charges	1	2,500.00	2,500.00
50	Walker/Crutches Rental (7 days)	1	1,400.00	1,400.00
51	DVT Pump Rental	7	300.00	2,100.00
52	Continuous Passive Motion (CPM) Machine	5	500.00	2,500.00
53	Medical Photography & Documentation	1	360.00	360.00
	<b>Sub-Total G</b>			<b>10,260.00</b>
	<b>TOTAL BILL AMOUNT</b>			<b>343,000.00</b>
	<b>Less: Discount</b>			<b>3,000.00</b>
	<b>GROSS BILL AMOUNT</b>			<b>340,000.00</b>
	<b>Add: GST @ 5%</b>			<b>0.00</b>
	<b>NET PAYABLE AMOUNT</b>			<b>340,000.00</b>

**PAYMENT DETAILS**

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<b>Mode of Payment:</b>	Insurance + Patient
<b>Amount Paid by Patient:</b>	₹ 65,000.00 (Receipt No: RC/90123/2025)
<b>Amount Claimed from TPA:</b>	₹ 275,000.00
<b>Balance Due:</b>	₹ 0.00

#### **PAYMENT BREAKDOWN EXPLANATION**

1. **Total Net Bill Amount:** ₹ 340,000.00
2. **TPA Authorized Amount:** ₹ 275,000.00
3. **Patient Responsibility (Paid):** ₹ 65,000.00

#### **Reason for patient payment:**

- Extended hospital stay (2 additional days for anemia management and blood sugar control): Rs.18,200
- Computer navigation system usage (not in original estimate): Rs.15,000
- Blood transfusion (2 units PRBC) and processing due to post-op anemia (Hb dropped to 7.8 g/dL): Rs.6,800
- Physician consultations for diabetes management (perioperative blood sugar fluctuations): Rs.4,500
- Additional blood sugar monitoring (12 tests) and investigations: Rs.3,600
- DVT prophylaxis extended course (Enoxaparin 10 doses instead of 5): Rs.2,250
- Insulin therapy for perioperative blood sugar control: Rs.2,800
- Additional physiotherapy sessions (6 instead of 4): Rs.1,600
- CPM machine rental, DVT pump, walker rental for extended stay: Rs.4,000
- Additional medications and wound care supplies: Rs.6,250

#### **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. Extended stay and additional costs were medically necessary due to post-operative anemia requiring transfusion and perioperative diabetes management - documented in discharge summary.

**Thank you for choosing Manipal Hospital Bangalore**