



Manipal Hospital Whitefield

I#143, 212-215, EPIP Industrial Area, Off Hoodi Village, KR Puram Hobli, Bengaluru 560 066, Karnataka
P +91 80 2502 7000

Pharmacy 24x7

DL NO: 20-KA-B61-166637, 20F-KA-B61-166638, 21-KA-B61-166639

TAX INVOICE

GSTIN :29AAGCM5933R2ZK

Hospital No :	MH011112341	Episode No. :	P01000740438
Name :	MR MANISH KUMAR	Bill No :	MHW23PCS0045159
Age/ Sex :	47 Y/Male	Date/Time :	11/07/2023 02:49PM
DL No :		Department :	ADMINISTRATION MHW
Emp No :		Doctor :	Referral Doctor OTC
Payor Name :			

S.No.	Item	MFG	HSN	QTY	MRP	Disc. Tax.Val	CGST	SGST	Total
1	PANTOCID DSR CAPSULE 15S, SUN PHARMA SIE0581A[31/01/25]	Sun	30049039	15	14.32	191.85	11.51	11.51	214.87
2	ANTOXIPAN TAB 15S (MULTIVITAMIN +L-METHIONINE +SELENIUM YEAST) TIRUPATI LIFE SCIENCES TLH0128#171[30/09/23]	Abb	30049099	45	31.07	1184.85	106.64	106.64	1398.12
3	CREON-25000 Units 300 MG Capsule CNB22010#171[30/10/24]	Abb	30049099	40	99.08	3538.40	212.30	212.30	3963.01
4	URSOCOL SR 450 MG TABLET 15S (URSODEOXYCHOLIC ACID 450 MG), SUN PHARMA LABORATORIES SID3303A#171[30/05/25]	Sun	30049036	15	47.97	685.35	17.13	17.13	719.62
5	CYCLOPAM tablet 22060278#171[30/11/25]	Ind	30049039	6	5.50	29.46	1.77	1.77	33.00

Generated/Printed By
Rithin N R

349.36 349.36 6328.62

Round Off 0.38

Total 6329.00

Computer Generated Invoice, No Signature Required

Manipal Health Enterprises Pvt. Ltd.

CIN: U85110KA2010PTC052540

Regd. Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru 560 017, Karnataka

P -91 80 4936 0300 E info@manipalhospitals.com www.manipalhospitals.com

manish kumar
9.8.23

Claimed by - The New India Assurance Co. Ltd
under software AC policy.

NAME	: MR MANISH KUMAR	HOSPITAL NO	: MH011112341
Age/Sex	: 47 Yrs / Male	IP NO	: I01000068386
Admission Date	: 04/07/2023	Medical Discharge Date	: 11/07/2023
Consultant	: Dr Shivakumar Varakanahalli	Department	: GASTROENTEROLOGY MEDICAL
PayorName	: Medi Assist India Private Limited	Ward/Bed	: 10 B MHW/1017 A

CONDITION ON DISCHARGE

Stable

FURTHER ADVICE ON DISCHARGE

Rx,

Soft diet

Cap Pantocid DSR 40 mg 1-0-0 30 min before breakfast x 2 weeks

Tab Antoxipan 1-1-1 after food x 2 weeks

Cap Creon 25000 1-1-1 in between food x 2 weeks

Tab Ursocol SR 450 mg 1-0-1 after food x 7 days

Tab Cyclopam 1-0-1 after food x 3 days

Water and fluid intake upto 3 litres per day

Incentive spirometry

Review in emergency in case of pain abdomen, fever, jaundice, vomiting etc

Review in OPD after 7 days with CBC and LFT reports

Plan for repeat ERCP and CBD Clearance with lap CCx after 2 weeks


Dr Shivakumar Varakanahalli

MBBS, MD, DM (Gastroenterology)

Department of GASTROENTEROLOGY MEDICAL, Reg No:83918

Seek medical help if:

- The initial symptoms get aggravated
- Any new symptoms (like breathlessness , bleeding etc) is causing concern

For MARS - 24x7 Ambulance Service Call - 080 2222 1111