





MANIPAL HOSPITAL BHUBANESWAR

Plot No.1, Besides Satyasai Enclave, Khandagiri, Bhubaneswar, 751030 P: +91 6746666600

CIN: U85110WB1986PTC040525

Date : 25/09/2025 09:25:56

INPATIENT INTERIM RUNNING DETAIL BILL WITH POLICY DISCOUNT

Name :  Reg No. : MH017321255
Age / Sex :  InPatient No : I30000069238

Sl.	Particulars				Amt(Rs.)
	Order Item	Qty	Price	Gross Amt	NetAmt
			Patient Share		0.00
			Net Payable		0.00
			IFFCO TOKIO GENERAL INSURANCE COMPANY LIMITED Share		63071.00
			Net Payable		63071.00

Generated By

Manager

(Sudam Charan Sahoo)



*This is a provisional running bill and does not include charges that may be incurred during the current hospitalisation of the patient. The final bill for this admission may be different from this bill.

Original

THE SALVATION ARMY EMERY HOSPITAL

Opp. Police Station, Amul Dairy Road,
ANAND - 388 001. Gujarat. Phone : (02692) 253737

Bill No. : **331** Date : 21/8/2025 O. P. No. 4799/2025

To M/s. _____

Patient's Name [REDACTED]

Admission 20/8/2025 Discharged 21/8/2025

Village : [REDACTED] Code No : _____

	Rs.	Ps.
Consultation <u>Emg Cons.</u>	300=00	
X - Ray		
Laboratory <u>(550 + 1800)</u>	2350=00	
Physiotherapy		
E. C. G. / Echo <u>Emg. ECG</u>	400=00	
Sonography		
Drugs <u>(70 + 100 + 311 + 1100)</u>	1581=00	
Operation		
Anaesthesia <u>AC</u>		
Ward / Room <u>Per day Rs. 1500/- x 2 days</u>	3000=00	
Doctors Visit Charge <u>Per day Rs. 300/- x 2 days</u>	600=00	
U. & I. M. Injection Service	400=00	
Blood Transfusion Service		
I. V. Infusion Service		
Dressing Charge		
Certificate		
Other Charges		
Nursing Care Per Day <u>Rs. 100/- x 2 days</u>	200=00	
<u>Rupees Eight Thousand Eight</u>		
<u>Hundred Thirty one only Total ...</u>	8831=00	

Sign

Kalpana



Patient Details

Bill No.

: INV-1000-25006551

Description	Date	Unit Rate	Qty	SGST	CGST	Amount(Rs)
MEDICINE & CONSUMABLES						
PANTOCID 40MG INJECTION NPA00282/ 30-11-2026 (300490)	21-04-2025	56.50	1	0	0	56.50
PANTOCID 40MG INJECTION, INJECTION, 40MG NPA00282/ 30-11-2026 (300490)	21-04-2025	56.50	2	0	0	113.00
POLYFLUSH - 10ML - POLYMED 8532424-L/ 30-09-2027 (90183220)	21-04-2025	83.00	1	0	0	83.00
RL 500ML OTSUKA 1247958/ 31-10-2027 (30045020)	21-04-2025	63.26	2	0	0	126.52
ROTA FLO (ROMSONS) G24K010932/ 31-10-2029 (90183990)	21-04-2025	587.00	1	0	0	587.00
SYRINGE 10ML 2411502/ 31-10-2029 (90183100)	21-04-2025	31.00	5	0	0	155.00
SYRINGE 10ML ... 2411502/ 31-10-2029 (90183100)	21-04-2025	31.00	2	0	0	62.00
URINE PORT-PLASTIC 01/ 30-04-2029 (3004)	21-04-2025	110.00	1	0	0	110.00
VELFIX I V DRESSING KIT (REF: 770043K) 01251074L/ 31-03-2027 (30051090)	21-04-2025	275.00	1	0	0	275.00
ZH MICRO RUB+ SOLUTION 500 ML, LIQUID, 2.5%+70% ZMR-25004/ 28-02-2027 (30049087)	21-04-2025	302.00	1	0	0	302.00
GERZONE 1.5GM INJECTON, INJECTION, 1.5GM F500042/ 31-12-2026 (30049099)	22-04-2025	256.17	1	0	0	256.17
KABIMOL 100ML FREEFLEX, INJECTION, 100ML 82TM782103/ 30-11-2026 (30049061)	22-04-2025	725.00	1	0	0	725.00
PANTOCID 40MG INJECTION, INJECTION, 40MG NPA00282/ 30-11-2026 (300490)	22-04-2025	56.50	2	0	0	113.00
EMESET 2ML INJECTION, INJECTION, 2ML 4A00546/ 30-09-2027 (30049035)	23-04-2025	13.35	2	0	0	26.70
EMESET 2ML INJECTION, INJECTION, 2ML 4A00546/ 30-09-2027 (30049035)	23-04-2025	13.35	2	0	0	26.70
GERZONE 1.5GM INJECTON, INJECTION, 1.5GM F500042/ 31-12-2026 (30049099)	23-04-2025	256.17	2	0	0	512.34
GERZONE 1.5GM INJECTON, INJECTION, 1.5GM F500042/ 31-12-2026 (30049099)	23-04-2025	256.17	1	0	0	256.17
I V SET AUTOFUSION SET - POLYMED 6422524-N/ 01-11-2029 (90183990)	21-04-2025	393.00	-1	0	0	-393.00
I V SET VENTED - ROMSONS K25A020842/ 31-12-2029 (90183990)	23-04-2025	225.00	1	0	0	225.00
I V SET VENTED - ROMSONS K25A020842/ 31-12-2029 (90183990)	23-04-2025	225.00	1	0	0	225.00
KABIMOL 100ML FREEFLEX, INJECTION, 100ML 82TM782103/ 30-11-2026 (30049061)	23-04-2025	725.00	3	0	0	2,175.00
KABIMOL 100ML FREEFLEX, INJECTION, 100ML 82TM782103/ 30-11-2026 (30049061)	23-04-2025	725.00	2	0	0	1,450.00
NEEDLE 16GX1.5' 240722/ 30-06-2029 (90183290)	23-04-2025	7.00	5	0	0	35.00
NITRILE (POWDER FREE) GLOVES MEDIUM 12-250330/ 02-03-2030 (40151900)	21-04-2025	15.00	-50	0	0	-750.00
NS 100ML ACULIFE, INFUSION, 100ML 1C250983/ 29-02-2028 (30045020)	23-04-2025	22.03	1	0	0	22.03
NS 100ML ACULIFE, INFUSION, 100ML 1C2511/ 29-02-2028 (30045020)	21-04-2025	22.03	-1	0	0	-22.03
NS 100ML ACULIFE, INFUSION, 100ML 2D250434/ 30-04-2028 (30045020)	23-04-2025	22.41	3	0	0	67.23
NS 500ML OTSUKA, INFUSION, 500ML 2244795/ 30-11-2027 (30045020)	23-04-2025	39.05	2	0	0	78.10

CLAIM PAID BY BAJAJ ALLIANZ

Rs.
Date

10 JUN 2025

₹ 66989

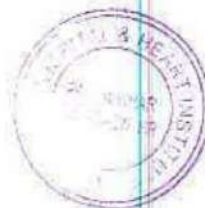
Health Administration Team

ID.No : [REDACTED] NAME [REDACTED] Age [REDACTED]

CONSUMABLE EMESET INJ 2ML	1670183 30/04/2020	1	1	0.00
INJ Ceftor 1gm	CPRL-05 30/03/2020	1	0	56.65
SUR IV SET	33205 05/02/2022	1	0	126.00
SUR EXAM. GLOVES	82MA47411 28/02/2022	4	0	24.00
SUR Syringe -10 ml(b.d.)	BNA24 30/01/2021	2	0	44.00
SUR SYRINGE -5ML DISPOVAN WITH NEE	GDH21 30/12/2021	2	0	28.00
CONSUMABLE NS 500ML 1*500ML	40680389 30/05/2021	1	0	74.26
INH NS 100ML(CLARIS)	40680402 30/05/2021	1	0	35.52
CONSUMABLE EXAMINATION GLOVES S. 1*100	BPFR30118C06 28/02/2022	4	0	24.00
Issue No 17458				
SYP Lycosule syp	Date 11/10/2018			
CONSUMABLE MUCAINE GEL 200ML	0222 30/04/2019	1	0	129.00
SYP Megatus syp	BPFR30118C06 28/02/2021	1	0	137.16
INJ DNS	L172045 30/12/2019	1	0	99.00
INJ Iq-mol inj	x324sd 30/12/2020	3	0	216.63
Issue No 17648				
CONSUMABLE EMESET INJ 2ML	A7156 30/05/2019	2	0	750.00
TAB DOM-DT -10	Date 12/10/2018			
INH NS 100ML(CLARIS)	1670183 30/04/2020	2	1	11.89
SUR Syringe -10 ml(b.d.)	C-80129 30/12/2019	6	0	14.70
INJ PERINORM -2ML (5MG/ML)	40680402 30/05/2021	3	0	106.56
IM/IV	BNA24 30/01/2021	3	0	66.00
IVS NS 500ML (CLARIS)	ge258027d 28/02/2021	2	2	0.00
Issue No 17558				
INJ Ceftor 1gm	GBC45 30/03/2020	1	0	74.26
INJ Nilgord	Date 12/10/2018			
INJ Iq-mol inj	CPRL-05 30/03/2020	2	0	113.30
ELE ECG ELECTRODES-3M	ngd-03 30/05/2020	1	0	198.00
	A7156 30/05/2019	1	0	375.00
	43617908G000 30/12/2022	5	0	124.90
Total Amount				5339.11
Rounded Off				5339.00

Dr. Naveen Chawla(Medicine Dept.) Visit Charge

Doctor Name	Visit Type	Date	Rate	Qty	Amount(Rs.)
Dr. Naveen Chawla(Medicine Dept.)	General	10/10/2018	750.00	1	750.00
Dr. Naveen Chawla(Medicine Dept.)	General	11/10/2018	750.00	1	750.00
Dr. Naveen Chawla(Medicine Dept.)	General	12/10/2018	600.00	1	600.00
Dr. Naveen Chawla(Medicine Dept.)	General	13/10/2018	600.00	1	600.00
Dr. Naveen Chawla(Medicine Dept.)	General	14/10/2018	600.00	1	600.00
Total Amount					3300.00



Dr. E.VISWANATH REDDY M.B.B.S., DNB., FID

Emergency Physician & Diabetologist
Registration No. : 88205

Dr. M.SUSHMALATHA M.B.B.S., MD

Consultant Pathologist
Registration No. : 104131

Name: [REDACTED]

Age: [REDACTED]

Sex: Male

Date/Time: 4/06/2021 10:10AM Hrs

Referred by: Dr.E.Viswanath Reddy

Name of the Test : COMPLETE BLOOD COUNT

Test	Result Units	Reference Values
Haemoglobin	13.3 g/dL	Male 12-16, Female 11-13 g/dL
HCT	40.6 %	34-45%
RBC	4.78	3.5-5.5 million/cumm
MCV	84.9 fL	80-100 fL
MCH	28.5 pg	26-34 pg
MCHC	33.5 g/dL	30-36 g/dL
WBC	14.2 $10^3/uL$	4000-11000/cumm
Lymphocytes	41.7 %	20-45%
Granulocytes	51.5 %	40-75%
Lym#	3.58 $10^3/uL$	
Gran#	4.61 $10^3/uL$	
Mid#	0.6 $10^3/uL$	
PLATELETS	312 $10^3/uL$	1.5 - 4.5 Lakhs/cumm
MPV	7.9 fL	

LAB TECHNICIAN


SIGNATURE

Dr. M. Sushmalatha M.B.B.S., M.D(Pathology)
Consultant Pathologist

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SUNSHINE HOSPITALS
(A Unit of Servejana Healthcare Pvt. Ltd.)
Laxmi Sagar Square, Puri - Cuttack Road
Bhubaneswar, Odisha - 751008
Tel: 0674-2571188, 0674-2573399, 9338108108

Hospitalisation Charges From 26-Aug-2018 18:53PM To 03-Sep-2018 16:16 PM

Ser.Code	Test/Item/Service Name	Batch	Exp.Dt.	Quantity	Amount	Exc.Amount
HAEMATOLOGY						
SER00083	APTT(ACTIVATED PARTIAL THROMBOPLASTIN TIME)			1	470.00	3,560.00
SER02069	BLOOD GROUPING AND RH			1	110.00	110.00
SER02070	CBC(COMPLETE BLOOD COUNT)			5	330.00	1,650.00
SER00719	DC (DIFFERENTIAL COUNTS)			1	100.00	100.00
SER01424	PT (PROTHROMBIN TEST) WITH INR			3	360.00	1,080.00
SER01909	TC (TOTAL LEUCOCYTE COUNT)			1	150.00	150.00
MICRO BIOLOGY						
SER00580	BLOOD CULTURE (BACT / ALERT VITEC IDENTIFICATION)			1	1,330.00	2,230.00
SER02081	ET SECRETION FOR CULTURE AND SENSITIVITY			1	450.00	450.00
SER01105	GRAMS STAIN			1	450.00	450.00
MRI SCAN						
SER01415	MRI BRAIN			1	9,770.00	9,770.00
PATHOLOGY						
SER02816	HAEMOGLOBIN (HB) SUNSHINE			1	110.00	110.00
SEROLOGY						
SER00054	HBS AG (SPOT)			1	250.00	7,450.00
SER01886	HCV (HEPATITIS C)			1	970.00	970.00
SER00823	HIV I/II (SPOT)			1	480.00	480.00
SER03166	TRACHEOSTOMY CHARGE			1	5,750.00	5,750.00
X RAY						
SER01164	BED SIDE X-RAY CHEST AP			4	620.00	2,480.00
SERVICE CHARGES						
HOSPITALITY SERVICES						
SER00688	ALPHA BED PER DAY			8	690.00	96,530.00
SER00187	BLOOD TRANSFUSION CHARGES-PER UNIT			5	420.00	5,520.00
SER00944	FLOWTRON PER DAY			3	2,370.00	2,100.00
SER00189	INTUBATION CHARGES			1	1,360.00	7,110.00
SER01235	NEBULISATION CHARGES			30	140.00	1,360.00
SER02043	OXYGEN PER DAY			8	4,080.00	4,200.00
SER00951	VENTILATOR PER DAY			8	5,450.00	32,640.00
NEPHROLOGY						
SER02045	HAEMO DIALYSIS HDU/MICU/SICU/CTICU .			4	6,075.00	43,600.00
PHYSIO THERAPY						
SER02742	PHYSIOTHERAPY - (SICU-MICU-ICCU-HDU-NICU-CTICU)			1	400.00	24,300.00
PHARMACY						
PHARMACY						
3 LUMEN DIALYSIS CATHETER (MFR:ARROW)	71F17B1418	02/22	1	5,080.00	126,249.94	5,080.00
3 WAY EXTENTION 10 CM(TOP) (MFR:KYOLING)	BA15S	12/22	1	159.00		159.00
3 WAY EXTENTION 10 CM(TOP) (MFR:KYOLING)	BB56S	01/23	1	159.00		159.00
A TO Z SYRUP 200 ML (MFR:ALKEM)	AZNS8079G	08/19	1	121.00		121.00
AHD SPECIAL 500ML	VL-1820	05/21	1	430.00		430.00
AMITAX-500 MG INJ	8132578	02/20	2	90.50		181.00
AMPHOMUL 50MG INJ (MFR:BHARAT SERUMS)	A01918003	02/20	2	1,612.18		3,224.36
ARTACIL 25MG INJ (MFR:NEON)	1303082	05/19	4	131.75		527.00
ATORVA 40MG TAB (MFR:ZYDUS)	1700449	09/19	2	19.61		39.22
ATORVA 40MG TAB (MFR:ZYDUS)	1801118	05/20	2	20.28		40.56
ATORVA 40MG TAB (MFR:ZYDUS)	1700447	09/19	7	19.61		137.27





INDU HOSPITAL

MULTISPECIALITY HOSPITAL & TRAUMA CENTER

(Unit of Indu health wellness Pvt. Ltd.)



Final Bill

Bill No. 002999	Date of Admission: 25/05/2025
MRD NO.1553/IPD	Date of Discharge: 29/05/2025
Patient name: [REDACTED]	Age: 2 years
FATHER Name: [REDACTED]	Discharge type: Normal
Address: VPO-SIHALI-MUNDAWAR -ALWAR (RAJ)	Neemrana
Consultant Doctor: Dr ASHISH SHARMA MBBS DCH DNB	

Description	Total amount
BED CHARGE IN SINGLE AC ROOM @ 3500 FOR* 4 DAY	14000
NURSING CHARGE IN SINGLE AC ROOM @ 600 FOR 4 DAY	2400
CONSULTATION CHARGE IN SINGLE AC ROOM @ 550* 08 VISIT	4400
LAB CHARGE	6828
MEDICINE CHARGE	12872

BILL AMOUNT 40 500

NET AMOUNT IN WORDS 40 500

(FOURTY THOUSAND FIVE HUNDRED ONLY)



Indu Health Wellness Pvt. Ltd.

APPROVED

Authorised Signatory

ISHWAR MEDICAL & GENERAL STORES

Shop No. 1, Ground Floor, S. No. 16, Hissa No. 3/1/3,
Gururaj Apt., Ambegaon Bk., Tal. Haveli, Pune.
M.: 7972631798

Patient Name : [REDACTED]

Add.: [REDACTED]

Dr. Name : Pratull Sundeha.

Invoice No. 445

DATE : 03/03/21

QTY.	PARTICULARS	COM.	BATCH NO.	EXP.	RUPEES
3	Piptaz 4.5.	COR	619423.	10/22	1350=00
2	Inj Pan 40.	ALK	149134	04/23	240=00
2	Milcarin 250.	ART	3914132	04/22	220=00
3	Emxet 8.	CEP	149134.	04/23	240=00
3	Inj Eldervit	E2D	1439124	04/22	210=00
1/1	Intracath No. 22Fr iv set.	VAS	149131/34131	04/23	910=00.
5/5	Dispo van 100L & SCC	VAS	143912/142130	01/22	100=00
4	Gloves NO. 8	HDF	N-98	01/23	260=00
				TOTAL	2930=00

Drug L. No. 20 - 133417, 20C - 133421, 21 - 133418

Please show the medicines to your doctor before use. Goods once sold
will not be accepted, Accidental over charges will be refunded.

ISHWAR MEDICAL AND GENERAL STORE

Bnt

PROPRIETOR

For ISHWAR MEDICAL & GENERAL STORES

ગોકુલ હોસ્પિટલ



ગોકુલ - સર્વિસ - પ્રાઇવેટ લિમિટેડ

GOKUL HOSPITAL - KUVADAVA ROAD
(Managed By Gokulam Lifescience Private Limited)

14, Sadguru Nagar, Nr. Ranchhoddas Ashram, Kuvadava Road, Rajkot. (Gujarat)-360 003
Ph.No : 0281-2550600/2550601
E-mail : info@gokulamlifescience.in

OPD BILL

Patient Name [REDACTED]

Age & Sex [REDACTED]

Case No 18405

Bill No 2102723

Bill Date 15/05/2021 03:05

Patient Type Cash

Sr.No	Description	Qty	Rate	Amount
1	REGISTRATION CHARGES	1	100.00	100.00
2	EMERGENCY CONSULTATION CHARGE SUPERSPECIALIST	1	2000.00	2000.00

Dr. DR.TEJAS CHOTAI

Bill Amount : 2,100.00

Rs. Two Thousand One Hundred Rupees

Final Amount 2,100.00

Amount Outstanding : 0

Amount Received : 2100.00

For GOKUL HOSPITAL KUVADAVA ROAD

Please Note:- Kindly issue a cheque in favour of " Gokulam Lifescience Private Limited"
LALJI



**MAULI
HOSPITAL**
Multispeciality

Regd. No.:887943109

IPD Receipt

Receipt No. : 433 Receipt date & Time : 15/12/2025 12:36 PM
IPD No. : 487 / 2025-2026 Bill No. : 529
Received with thanks from : [REDACTED]
The Sum of : 20,610.00
Amount In Words : Twenty Thousand Six Hundred Ten Only
Payment Mode : Credit Card
Instrument No. : 5278 Date: 15/12/2025
Bank : American Express Branch: MUMBAI
Bank Ltd.

In Payment of following Bill / Bills :

ecNo	RecDt	Tot.Bill.Amt	Deposit	Bill Disc	Tot.Amt.Recd.	Paid	Pend Amt.	Mode
433	15/12/2025	30,610.00	10,000.00	0.00	20,610.00	20,610.00	0.00	Credit C

Advance Deposit Details

SNo.	Mode	Rec. No	Rec. Date	Inst. No	Inst. Date	Amount	Deposit Type
1152	Credit Card	575	13/12/2025	4567	13/12/2025	10,000.00	Against Bill

Receipt Generated By :Vidhi Khot

Date & Time : 15/12/2025 12:36:49

This Receipt was printed using Caresoft HIS www.caresoft.co.in by Vidhi Khot

Signature :

