

BILL ESTIMATE

Patient Name : MASTER. SHYAM [SR1006404]

Age / Gender : 6 Yr/M

Doctor Name: Dr. JAY RELAN

Department : PEDIATRIC CARDIOLOGY & CARDIAC SURGERY

Est Rate Category : GENERAL WARD

Est Billing Category : PAYING

Validity: 7 DAYS

Panel Group : CASH

Estimation Date : 09-10-2025

Address : Hno. 56 talwandi gate mohalla misi gali raikot Ludhiana Punjab

Expected Admission Date :

Remarks : Further stay and management as per actual

Description	Rate	Quantity	Amount
Hospital Stay Charges	3500.00	0	0.00
Pediatric FONTAN(Exl Conduit Cost)	236500.00	1	236500.00
Graft	150000.00	1	150000.00
Total Estimate Approx.			Rs. 386500.00

Total Estimate Approx : Rs.386500.00 - Three Lakh Eighty Six Thousand Five Hundred

(All figures are in Rupees (INR) only)