



Patient Name: rohini
Department: Cardiologyxcv
Consulting Dr.: Yash

IPD ID: 8109052025
Receipt No.: IPD-8109052025
Admitted Date: 09/05/2025

Billing Details

No	Description	Date	Qty	Amount (')
1	Room Charge (Type 1)	09/05/2025	2 days	2000
Discount				2000
Grand Total				0

Payment Mode

Cash

Patient Signature

Hospital Authority