



Reg No: MH/THA/NA073

Patient Name: LAKSHITA SHAHI
Department: GENERAL MEDICINE
Consulting Dr.: Sumedh Kirdak
Admitted Date: 28/07/2025

IPD ID: 27228072025
Receipt No.: IPD-27228072025
UH ID: AH15728072025
Discharged Date: 30/07/2025

Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Triple Sharing	28/07/2025 - 30/07/2025	2 days	8600
2	Registration	28/07/2025	1	500
3	HGT	28/07/2025	1	100
4	O2	28/07/2025	1	2000
5	VEINFLOW	28/07/2025	1	200
6	ECG	28/07/2025	1	500
7	CHEST X-RAY	28/07/2025	1	1000
8	Dietitian visit	28/07/2025	1	700
9	2D ECHO	28/07/2025	1	3000
10	Dr.Sumedh(Triple Shar- ing)	28/07/2025, 29/07/2025, 30/07/2025	3	3000
11	NEBULISATION	28/07/2025, 29/07/2025, 30/07/2025	6	900
12	CARDIOLOGIST VISIT	28/07/2025	1	1500
Discount				3000
Paid Amount				19000
Grand Total				22000

Payment Mode: Online

Patient Signature

Hospital Authority