



**Patient Name:** ANITA DUDHANE  
**Department:** GENERAL MEDICINE  
**Consulting Dr.:** Sumedh Kirdak

**IPD ID:** 17624062025  
**Receipt No.:** IPD-17624062025  
**Admitted Date:** 24/06/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Single Room	24/06/2025 - 29/06/2025	5 days	31000
2	Registration	24/06/2025	1	500
3	ECG	24/06/2025	1	500
4	HGT	24/06/2025, 25/06/2025, 26/06/2025, 27/06/2025, 28/06/2025	16	1600
5	Dietitian visit	26/06/2025	1	700
6	BEDSIDE XRAY/EMERGENCY XRAY	24/06/2025	1	1200
7	ENDOSCOPY	25/06/2025	1	9000
8	VEINFLOW	26/06/2025	1	200
9	Dr.Sumedh(Single Room)	24/06/2025, 25/06/2025, 26/06/2025, 27/06/2025	4	4800
10	INFUSION PUMP	24/06/2025, 25/06/2025, 26/06/2025, 27/06/2025	4	4000
<b>Grand Total</b>				<b>53500</b>

**Payment Mode:** Cash

---

Patient Signature

---

Hospital Authority