



**Patient Name:** MR. SANJAY GOVIND RASHINGKAR  
**Department:** GENERAL MEDICINE  
**Consulting Dr.:** Sumedh Kirdak

**IPD ID:** 26625072025  
**Receipt No.:** IPD-26625072025  
**Admitted Date:** 22/07/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Triple Sharing	22/07/2025 - 25/07/2025	3 days	12900
2	Registration	22/07/2025	1	500
3	HGT	22/07/2025	1	100
4	VEINFLOW	23/07/2025	1	200
5	ECG	22/07/2025	1	500
6	CHEST X-RAY	22/07/2025	1	1000
7	Dietitian visit	25/07/2025	1	700
8	NEBULISATION	22/07/2025, 23/07/2025, 24/07/2025, 25/07/2025	9	1350
9	Dr.Sumedh(Triple Sharing)	23/07/2025, 24/07/2025, 25/07/2025	4	4000
Discount				1250
Grand Total				20000

**Payment Mode:** Online

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Patient Signature

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Hospital Authority