



Reg No: MH/THA/NA073

**Patient Name:** MR . SHARAD JOSHI  
**Department:** GENERAL MEDICINE  
**Consulting Dr.:** Dr. Sumedh Kirdak  
**Admitted Date:** 13/09/2025

**IPD ID:** IPD/40/09/2025  
**Receipt No.:** IPD-IPD/40/09/2025  
**UH ID:** AH/09/2025/36  
**Discharged Date:** 18/09/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Single Room	13/09/2025 - 19/09/2025	6 days	37200
2	Registration	13/09/2025	1	500
3	VEINFLOW	13/09/2025	1	200
4	O2	13/09/2025, 14/09/2025, 15/09/2025, 16/09/2025	4	8000
5	HGT	13/09/2025	1	100
6	CATHETERISATION	14/09/2025	1	1500
7	CHEST X-RAY	13/09/2025	1	1000
8	2D ECHO	17/09/2025	1	3000
9	ECG	13/09/2025	1	500
10	INFUSION PUMP	14/09/2025, 15/09/2025, 16/09/2025, 17/09/2025	4	4000
11	Dr.Sumedh(Single Room)	14/09/2025, 15/09/2025, 16/09/2025, 17/09/2025	4	4800
				<b>Discount</b> 1800
				<b>Paid Amount</b> 59000
				<b>Grand Total</b> 60800

**Payment Mode:** Cash

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Patient Signature

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Hospital Authority