

Patient Name: MR. NITESH GAUDASE
Department: GENERAL MEDICINE
Consulting Dr.: Dr. Sumedh Kirdak
Admitted Date: 29/08/2025

IPD ID: IPD/76/08/2025
Receipt No.: IPD-IPD/76/08/2025
UH ID: AH/08/2025/67
Discharged Date: 18/09/2025

Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For ICU	29/08/2025 - 19/09/2025	21 days	144900
2	Registration	29/08/2025	1	500
3	EMERGENCY CHARGES	29/08/2025	1	1500
4	VEINFLOW	29/08/2025	1	200
5	BLOOD TRANSFUSION	29/08/2025, 30/08/2025, 31/08/2025, 01/09/2025, 02/09/2025, 13/09/2025, 14/09/2025	9	13500
6	O2	29/08/2025, 30/08/2025, 31/08/2025, 01/09/2025, 02/09/2025, 03/09/2025, 04/09/2025, 05/09/2025, 06/09/2025, 07/09/2025, 08/09/2025, 09/09/2025, 10/09/2025, 11/09/2025, 12/09/2025, 13/09/2025, 14/09/2025, 15/09/2025, 16/09/2025, 17/09/2025	20	40000
7	MONITOR	29/08/2025, 30/08/2025, 31/08/2025, 01/09/2025, 02/09/2025, 03/09/2025, 04/09/2025, 05/09/2025, 06/09/2025, 07/09/2025, 08/09/2025, 09/09/2025, 10/09/2025, 11/09/2025, 12/09/2025, 13/09/2025, 14/09/2025, 15/09/2025, 16/09/2025, 17/09/2025	20	20000
8	NEBULISATION	31/08/2025, 01/09/2025, 02/09/2025, 03/09/2025, 04/09/2025, 05/09/2025, 06/09/2025, 07/09/2025, 08/09/2025, 09/09/2025, 10/09/2025, 11/09/2025, 12/09/2025, 13/09/2025	37	5550
9	HGT	29/08/2025, 31/08/2025	2	200
10	AIRBED	10/09/2025, 11/09/2025, 12/09/2025	3	1500
11	INFUSION PUMP	29/08/2025, 30/08/2025, 31/08/2025, 01/09/2025, 02/09/2025, 03/09/2025, 04/09/2025, 06/09/2025, 07/09/2025, 08/09/2025,	29	29000

09/09/2025, 10/09/2025,
11/09/2025

12	CENTRAL LINE INSERTION	29/08/2025, 13/09/2025	2	10000
13	RYLES TUBE INSERTION	29/08/2025	1	1200
14	CATHETERISATION	29/08/2025	1	1500
15	2D ECHO + CONSULTING	03/09/2025	1	3500
16	NEPHROLOGIST VISIT	04/09/2025	1	2000
17	Dietitian visit	03/09/2025, 05/09/2025	2	1400
18	ECG	29/08/2025	1	500
19	BEDSIDE XRAY/EMERGENCY XRAY	29/08/2025, 09/09/2025, 11/09/2025	3	3600
20	PLEURAL TAPPING	08/09/2025	1	3000
21	Dr.Sumedh(ICU)	29/08/2025, 30/08/2025, 31/08/2025, 01/09/2025, 02/09/2025, 03/09/2025, 04/09/2025, 05/09/2025	10	16000
				Discount 299550
				Paid Amount 0
				Grand Total 299550

Payment Mode: Cash

Patient Signature

Hospital Authority