



Reg No: MH/THA/NA073

Patient Name: MR. AVINASH RAMDAS BHOIR
Department: GENERAL MEDICINE
Consulting Dr.: Sumedh Kirdak
Admitted Date: 07/08/2025

IPD ID: IPD/17/08/2025
Receipt No.: IPD-IPD/17/08/2025
UH ID: AH/08/2025/16
Discharged Date: 07/08/2025

Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Triple Sharing	07/08/2025	1 day	4300
2	Registration	07/08/2025	1	500
3	VEINFLOW	07/08/2025	1	200
4	HGT	07/08/2025	1	100
5	ECG	07/08/2025	1	500
6	Dr.Sumedh(Triple Sharing)	07/08/2025	1	1000
				Paid Amount 6600
				Grand Total 6600

Payment Mode: Online

Patient Signature

Hospital Authority