



**Patient Name:** MANSI .S. PATIL  
**Department:** GENERAL MEDICINE  
**Consulting Dr.:** Sumedh Kirdak

**IPD ID:** 24117072025  
**Receipt No.:** IPD-24117072025  
**Admitted Date:** 16/07/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Single Room	16/07/2025 - 20/07/2025	4 days	24800
2	Registration	16/07/2025	1	500
3	HGT	16/07/2025	1	100
4	NEBULISATION	16/07/2025, 17/07/2025, 18/07/2025	7	1050
5	VEINFLOW	16/07/2025	1	200
6	Dietitian visit	18/07/2025	1	700
7	CHEST X-RAY	17/07/2025	1	1000
8	Dr.Sumedh(Single Room)	16/07/2025, 17/07/2025, 18/07/2025	3	3600
				<b>Grand Total</b> <b>31950</b>

**Payment Mode:** Cash

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Patient Signature

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Hospital Authority