



Reg No: MH/THA/NA073

**Patient Name:** MRS. PRANALI SWAPNEEL SAWANT  
**Department:** GENERAL MEDICINE  
**Consulting Dr.:** Dr. Sumedh Kirdak  
**Admitted Date:** 19/10/2025

**IPD ID:** IPD/60/10/2025  
**Receipt No.:** IPD-IPD/60/10/2025  
**UH ID:** AH/10/2025/54  
**Discharged Date:** 21/10/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Triple Sharing	19/10/2025 - 21/10/2025	2 days	8600
2	Registration	19/10/2025	1	500
3	VEINFLOW	19/10/2025	1	200
4	NEBULISATION	19/10/2025, 20/10/2025, 21/10/2025	6	900
5	HGT	19/10/2025	1	100
6	ECG	19/10/2025	1	500
7	CHEST X-RAY	19/10/2025	1	1000
8	Dr.Sumedh(Triple Shar- ing)	20/10/2025, 21/10/2025	2	2000
Paid Amount				13800
Grand Total				13800

**Payment Mode:** Online

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Patient Signature

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Hospital Authority