



Reg No: MH/THA/NA073

**Patient Name:** MRS. SHUBHADA SUBHASH GOLE

**Department:** GENERAL MEDICINE

**Consulting Dr.:** Dr. Sumedh Kirdak

**Admitted Date:** 07/09/2025

**IPD ID:** IPD/24/09/2025

**Receipt No.:** IPD-IPD/24/09/2025

**UH ID:** AH/09/2025/23

**Discharged Date:** 09/09/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Twin Sharing	07/09/2025 - 09/09/2025	2 days	11400
2	Registration	07/09/2025	1	500
3	HGT	07/09/2025, 08/09/2025, 09/09/2025	6	600
4	Dietitian visit	08/09/2025	1	700
5	VEINFLOW	07/09/2025	1	200
6	ECG	07/09/2025	1	500
7	Dr.Sumedh(Twin Sharing)	08/09/2025	1	1200
				<b>Paid Amount</b> 15100
				<b>Grand Total</b> 15100

**Payment Mode:** Online

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Patient Signature

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Hospital Authority