



**Patient Name:** MRS. DEVATA D. HEMBADE  
**Department:** GENERAL MEDICINE  
**Consulting Dr.:** Sumedh Kirdak

**IPD ID:** 23113072025  
**Receipt No.:** IPD-23113072025  
**Admitted Date:** 10/07/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Single Room	10/07/2025 - 14/07/2025	4 days	24800
2	NEBULISATION	10/07/2025, 11/07/2025, 12/07/2025, 13/07/2025	10	1500
3	HGT	10/07/2025	1	100
4	INFUSION PUMP	10/07/2025, 11/07/2025	2	2000
5	ENDOSCOPY	11/07/2025	1	9000
6	ECG	10/07/2025	1	500
7	CHEST X-RAY	11/07/2025	1	1000
8	2D ECHO	11/07/2025	1	3000
9	Dietitian visit	11/07/2025	1	700
10	VEINFLOW	10/07/2025	1	200
11	Registration	10/07/2025	1	500
12	Dr.Sumedh(Single Room)	10/07/2025, 11/07/2025, 12/07/2025	3	3600
Grand Total				46900

**Payment Mode:** Online

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Patient Signature

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Hospital Authority