



Reg No: MH/THA/NA073

**Patient Name:** SANDEEP RAJPUT  
**Department:** GENERAL MEDICINE  
**Consulting Dr.:** Sumedh Kirdak  
**Admitted Date:** 23/08/2025

**IPD ID:** IPD/52/08/2025  
**Receipt No.:** IPD-IPD/52/08/2025  
**UH ID:** AH/08/2025/47  
**Discharged Date:** 25/08/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Triple Sharing	23/08/2025 - 25/08/2025	2 days	8600
2	Room Charge For Twin Sharing	25/08/2025	1 day	5700
3	Registration	23/08/2025	1	500
4	HGT	23/08/2025, 24/08/2025, 25/08/2025	9	900
5	Dietitian visit	25/08/2025	1	700
6	Dr.Sumedh(Triple Sharing)	23/08/2025	1	1000
7	ECG	23/08/2025	2	1000
8	CHEST X-RAY	23/08/2025	1	1000
9	2D ECHO	24/08/2025	1	3000
10	Dr.Sumedh(Twin Sharing)	24/08/2025	1	1200
11	VEINFLOW	23/08/2025	1	200
				Discount 1800
				Paid Amount 22000
				Grand Total 23800

**Payment Mode:** Cash

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Patient Signature

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Hospital Authority