



Reg No: MH/THA/NA073

Patient Name: CHITRA GIRISH BHOIR
Department: GENERAL MEDICINE
Consulting Dr.: Dr. Sumedh Kirdak
Admitted Date: 01/11/2025

IPD ID: IPD/07/11/2025
Receipt No.: IPD-IPD/07/11/2025
UH ID: AH/11/2025/04
Discharged Date: 04/11/2025

Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Triple Sharing	01/11/2025 - 04/11/2025	3 days	12900
2	Registration	01/11/2025	1	500
3	VEINFLOW	01/11/2025	1	200
4	HGT	01/11/2025	1	100
5	CHEST X-RAY	01/11/2025	1	1000
6	ECG	01/11/2025	1	500
7	Dr.Sumedh(Triple Shar- ing)	01/11/2025, 02/11/2025, 03/11/2025	3	3000
Discount				200
Paid Amount				18000
Grand Total				18200

Payment Mode: Online

Patient Signature

Hospital Authority