



Reg No: MH/THA/NA073

Patient Name: RAJASHREE KHANDARE
Department: GENERAL MEDICINE
Consulting Dr.: Dr. Sumedh Kirdak
Admitted Date: 15/11/2025

IPD ID: IPD/38/11/2025
Receipt No.: IPD-IPD/38/11/2025
UH ID: AH/11/2025/33
Discharged Date: 18/11/2025

Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Triple Sharing	15/11/2025 - 18/11/2025	3 days	12900
2	Registration	15/11/2025	1	500
3	VEINFLOW	15/11/2025	1	200
4	HGT	15/11/2025	1	100
5	ECG	15/11/2025	1	500
6	CHEST X-RAY	15/11/2025	1	1000
7	Dr.Sumedh(Triple Shar- ing)	16/11/2025, 17/11/2025, 18/11/2025	3	3000
Paid Amount				18200
Grand Total				18200

Payment Mode: Online

Patient Signature

Hospital Authority