



Reg No: MH/THA/NA073

Patient Name: MRS . NILIMA MOHANRAO ZADE
Department: GENERAL MEDICINE
Consulting Dr.: Sumedh Kirdak
Admitted Date: 26/08/2025

IPD ID: IPD/64/08/2025
Receipt No.: IPD-IPD/64/08/2025
UH ID: AH13819072025
Discharged Date: 29/08/2025

Billing Details

| No | Description | Date | Qty | Amount |
|-------------|--------------------------------|--|--------|--------|
| 1 | Room Charge For Triple Sharing | 26/08/2025 - 29/08/2025 | 3 days | 12900 |
| 2 | Registration | 26/08/2025 | 1 | 500 |
| 3 | O2 | 26/08/2025, 27/08/2025 | 2 | 4000 |
| 4 | NEBULISATION | 26/08/2025, 27/08/2025, 28/08/2025, 29/08/2025 | 10 | 1500 |
| 5 | HGT | 26/08/2025, 27/08/2025 | 3 | 300 |
| 6 | Dietitian visit | 28/08/2025 | 1 | 700 |
| 7 | BEDSIDE XRAY | 27/08/2025 | 1 | 1200 |
| 8 | ECG | 26/08/2025 | 1 | 500 |
| 9 | VEINFLOW | 28/08/2025 | 1 | 200 |
| 10 | Dr.Sumedh(Triple Shar- ing) | 26/08/2025, 27/08/2025, 28/08/2025, 29/08/2025 | 4 | 4000 |
| Paid Amount | | | | 25800 |
| Grand Total | | | | 25800 |

Payment Mode: Online

Patient Signature

Hospital Authority