



Reg No: MH/THA/NA073

Patient Name: MR. MANGESH SOLASE
Department: GENERAL MEDICINE
Consulting Dr.: Dr. Sumedh Kirdak
Admitted Date: 26/09/2025

IPD ID: IPD/73/09/2025
Receipt No.: IPD-IPD/73/09/2025
UH ID: AH/09/2025/65
Discharged Date: 29/09/2025

Billing Details

| No | Description | Date | Qty | Amount |
|-------------|--------------------------------|-------------------------|--------|--------|
| 1 | Room Charge For Triple Sharing | 26/09/2025 - 29/09/2025 | 3 days | 12900 |
| 2 | Registration | 26/09/2025 | 1 | 500 |
| 3 | VEINFLOW | 26/09/2025 | 1 | 200 |
| 4 | HGT | 26/09/2025 | 1 | 100 |
| 5 | ECG | 26/09/2025 | 1 | 500 |
| 6 | CHEST X-RAY | 26/09/2025 | 1 | 1000 |
| 7 | Dr.Sumedh(Triple Shar- ing) | 27/09/2025, 29/09/2025 | 2 | 2000 |
| Paid Amount | | | | 17200 |
| Grand Total | | | | 17200 |

Payment Mode: Cash

Patient Signature

Hospital Authority