



Patient Name: MR. NARENDRA KALYANI
Department: GENERAL MEDICINE
Consulting Dr.: Sumedh Kirdak

IPD ID: 20706072025
Receipt No.: IPD-20706072025
Admitted Date: 05/07/2025

Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For ICU	05/07/2025	1 day	6900
2	Room Charge For Triple Sharing	06/07/2025	1 day	4300
3	O2	05/07/2025	1	2000
4	VEINFLOW	05/07/2025	1	200
5	Registration	05/07/2025	1	500
6	MONITOR	05/07/2025	1	1000
7	HGT	05/07/2025, 06/07/2025	4	400
8	ECG	05/07/2025	3	1500
9	CHEST X-RAY	05/07/2025	1	1000
10	Dietitian visit	06/07/2025	1	700
11	Dr.Sumedh(ICU)	05/07/2025	1	1600
12	Dr.Sumedh(Triple Sharing)	06/07/2025	1	1000
13	EMERGENCY CHARGES	05/07/2025	1	1500
Discount				1100
Grand Total				21500

Payment Mode: Online

Patient Signature

Hospital Authority