



Reg No: MH/THA/NA073

Patient Name: MRS . SMITA VILAS WAYAL

Department: GENERAL MEDICINE

Consulting Dr.: Dr. Sumedh Kirdak

Admitted Date: 12/09/2025

IPD ID: IPD/32/09/2025

Receipt No.: IPD-IPD/32/09/2025

UH ID: AH/09/2025/32

Discharged Date: 16/09/2025

Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Twin Sharing	12/09/2025 - 16/09/2025	4 days	22800
2	Registration	12/09/2025	1	500
3	VEINFLOW	12/09/2025	1	200
4	STEAM	12/09/2025, 13/09/2025, 14/09/2025, 15/09/2025	10	1500
5	Dr.Sumedh(Twin Sharing)	13/09/2025, 14/09/2025, 15/09/2025, 16/09/2025	4	4800
6	ECG	12/09/2025	1	500
				Paid Amount 30300
				Grand Total 30300

Payment Mode: Cash

Patient Signature

Hospital Authority