



**Patient Name:** ASHOK DUBEY  
**Department:** GENERAL MEDICINE  
**Consulting Dr.:** Sumedh Kirdak

**IPD ID:** 24317072025  
**Receipt No.:** IPD-24317072025  
**Admitted Date:** 16/07/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Triple Sharing	16/07/2025 - 18/07/2025	2 days	8600
2	Registration	16/07/2025	1	500
3	HGT	16/07/2025	1	100
4	VEINFLOW	16/07/2025	1	200
5	ECG	16/07/2025	1	500
6	CHEST X-RAY	16/07/2025	1	1000
7	Dietitian visit	16/07/2025	1	700
8	Dr.Sumedh(Triple Sharing)	16/07/2025	1	1000
<b>Grand Total</b>				<b>12600</b>

**Payment Mode:** Online

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Patient Signature

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Hospital Authority