



Reg No: MH/THA/NA073

**Patient Name:** GEETANJALI AMIT DIVEKAR  
**Department:** GENERAL MEDICINE  
**Consulting Dr.:** Sumedh Kirdak  
**Admitted Date:** 04/09/2025

**IPD ID:** IPD/12/09/2025  
**Receipt No.:** IPD-IPD/12/09/2025  
**UH ID:** AH/09/2025/11  
**Discharged Date:** 04/09/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Twin Sharing	03/09/2025 - 05/09/2025	2 days	11400
2	Registration	04/09/2025	1	500
3	EMERGENCY CHARGES	04/09/2025	1	1500
4	NEBULISATION	04/09/2025	2	300
5	HGT	04/09/2025	1	100
6	ECG	04/09/2025	1	500
7	CHEST X-RAY	04/09/2025	1	1000
				<b>Paid Amount</b> 15300
				<b>Grand Total</b> 15300

**Payment Mode:** Online

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Patient Signature

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Hospital Authority