

डेडीकेटेड फ्रेट कोरिडोर कॉर्पोरेशन ऑफ इण्डिया लि.

भारत सरकार का उपक्रम

Dedicated Freight Corridor Corporation of India Ltd.

(A Government of India Enterprise)



No. BRC/GEN/Medical/2022-23/718/Vol.43

Date: 24/12/2024

To,

GM/HR

DFCCIL Corporate Office,
New Delhi.

Sub: Reimbursement of Medical Expenses case of Shri. Manoj Kumar Upadhyay, Dy PM/Civil (EC:101129) of DFCCIL Vadodara unit.

Ref: Shri. Manoj Kumar Upadhyay, Dy PM/Civil's application dt.10/12/'24.

XXXXX

Please find herewith the claim of medical expenses amounting to **Rs. 3,05,462/-** for treatment of Shri. Shri. Manoj Kumar Upadhyay, Dy PM/Civil, which is forwarded along with all original bills of medicine/hospital charges duly self-certified for sanction and payment please.

(Sudha P Rao)
Project Manager/HR
DFCCIL/Vadodara

Encl: Shri Manoj Kumar Upadhyay's application & relevant documents (Total 89 pages)

DISCHARGE SUMMARY

CONDITION ON	: VITALLY STABLE
DICHAIRGE	CONSCIOUS AND ORIENTED .

RX(Advise On Discharge)

TAB.ZOCEF 500MG P/O 1--0---1 X 10 DAYS
 TAB.FENORA PLUS P/O 1--1---1 X 10 DAYS
 CAP.RABIKOO DSR P/O 1--0--1 X 10 DAYS X BEFORE MEAL
 TAB.ROCALTROL P/O 2---2---2 X CONTINUE
 TAB.SHELICAL 500MG P/O 2--2---2--2 XCONTINUE

WHEN TO OBTAIN : FEVER, PAIN AT OT SITE

URGENT CARE

HOW TO OBTAIN : RECEPTION NUMBER - 0261 6776600/66,EMREGRECEPTION NUMBER-0261

URGENT CARE 6776600/66 , EMERGENCY NUMBER - 091-9426645559 ,0261-6776608

Follow up : DRAIN REMOVAL AFTER 2 DAYS AT SAI ANJALI HOSPITAL AT 4-5 PM. AND AFTER 3 DAYS TO DR PRADEEP DALWADI WITH S CALCIUM .

GENERAL INSTRUCTION :

All the Medicines with their importance as well as their side effects has been explained to me (Patient / Relative) in my own language & I agree that I have understood it well and shall follow the same.

મને (દર્દી / રંગંધી) મારી ભાષા માં બદી જ દવાઓની અગત્યતા અને આડાસાં વિષે સમજાવવામાં આપેલું છે. આ વિષે મને સારી દીઠે સમજણ પડી છે. અને તે અનુસરીશ.

સર્વો : _____

નામ : _____

સંબંધ : _____

તારીખ: _____

Prepared By : Dr. Kamlesh Manushai Kalsariya

DR. FARIDA WADIA

Signature

Berry Shafiq Adenwala

Vishal



Unique Hospital

Multispeciality & Research Institute

healing with humanity

Run by Surat Lifecare Pvt. Ltd.

DISCHARGE SUMMARY

Name : MANOJKUMAR KAILASHBABU UPADHYAY	Age/Sex : 55 Yrs./Male
Dr. Name : DR. FARIDA WADIA	UHID : 10909
Discharge Type : IMPROVED	IPD No : I/1024/54
DOA & Time : 04-Oct-2024 1:41 pm	Room Type : Semi Special
	DOD & Time : 09-Oct-2024 10:24 am
DIAGNOSIS	: LEFT FOLLICULAR THYROID NODULE . S/O-SUBTOTAL THYROIDECTOMY DONE .
HISTORY AND CLINICAL SUMMARY	: A 55 YEAR OLD MALE PATIENT ADMITTED WITH C/O-LEFT THYROID SWELLING SINCE 1 MONTHS . FNAC S/O-FOLLICULAR NEOPLASM ON 28/09/24. ON ADMISSION VITAL:TEMP:N,BP:140/80 MMHG,PR:92/MIN,SPO2:97% WITH ROOM AIR . PATIENT ADMITTED UNDER CARE OF DR FARIDA WADIA ,ALL NEEDED INVESTIGATION DONE AND PATIENT ADMITTED FOR SURGICAL INTERVENTION AND PRE OPERATION FITNESS DONE BY DR SAMIR GAMAI SO AFTER EXPLAINING PATIENT RELATIVE FOR S/P AND WRITTEN CONSENT TAKEN THEN OT-SUBTOTAL THYROIDECTOMY DONE BY DR FARIDA WADIA/DR ALOK KULKARNI UNDER G/A GIVEN BY DR HARESH SUTHAR ON 05/10/24.POST OP PATIENT SHIFT TO ICU AND REFERRED TO DR PRADEEP DALWADI ATTEND BY HIM AND ADVICE FOLLOWED AND PATIENT CONDITION GRADULLY IMPROVE AND VITALLY STABLE SO GIVEN DISCHARGE WITH BELOW MENTION MEDICATION AND FOLLOWUP.
SURGERY / PROCEDURE NAME	: OT-SUBTOTAL THYROIDECTOMY DONE BY DR FARIDA WADIA/DR ALOK KULKARNI UNDER G/A GIVEN BY DR HARESH SUTHAR ON 05/10/24.
TREATMENT GIVEN	: IV FLUID INJ.ZOSTUM 3GM IV BD INJ.OMEZ 40MG IV BD INJ.DYNAPAR 1AMP IV TDS INJ.CONTRAMOL 100MG IV TDS INJ.EMSET 8MG IV TDS INJ.DEXONA 2ML IV BD TAB.ROCALTROL P/O 2---2---2---2 TAB.SHELICAL 500MG P/O 2--2---2--2
INVESTIGATION	: ALL NEEDED INVESTIGATION ATTACHED WITH FILES.
SURGICAL NOTE	: OT-SUBTOTAL THYROIDECTOMY DONE BY DR FARIDA WADIA/DR ALOK KULKARNI UNDER G/A GIVEN BY DR HARESH SUTHAR ON 05/10/24.

Unique Hospital Multispeciality & Research Institute

Nr. Kiran Motors, Opp. Unique B.R.T.S Junction, Civil Hospital Char Rasta - Sosyo Circle Lane,
Off Ring Road, Surat - 395017.

Tel.: 0261-6776666 / 00 Email : uniquehospitalsurat@yahoo.com Web.: www.uniquehospital.in



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Note

I, Manoj Kumar Upadhyay, Dy.PM / Engg-ST, was hospitalized for the indoor treatment/ surgery of LEFT FOLLICULAR THYROID NODULE from 04.10.2024 to 09.10.2024. I resumed duty on 05.11.2024 after getting fitness certificate from hospital. The summary of expenditure along with bills duly certified and attached herewith. The total expenditure on the treatment was 3,05,462/. I remained busy in section for preparation in connection with proposed visit of MD Sir. Due to this reason, I could not submit the reimbursement of medical expenditure in time.

May please approve the reimbursement of my medical expenditure with condonation of delay in submitting the claim.

MANOJKUMA Digitally signed by
R MANOJKUMAR
KAILASHBABU
KAILASHBABU UPADHYAY
U UPADHYAY Date: 2024.12.14
11:00:40 +05'30'

Dy.PM/Engg-ST

Dy. CPM/Engg-South

May pls approve the reimbursement of medical expenditure amounting 3,05,462/- as claimed above with condonations of delay in submitting the claim.

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14/12/24

CGM/BRC

B. X 23.12.24

23	C9081 27.10.2024	115/-	47
24	OPCA25/341442 23.09.2024	150/-	45-46
25	P25356 26.09.2024	1500/-	40-41
26	OPCA25/340890 23.09.2024	150/-	43-46
27	GBMS0008880/ 01.10.2024	1350/-	33-39
28	4780 03.10.2024	1000/-	30-32
29	GEN2425/2128/ 09.10.2024	400/-	54-55
30	GEN2425/2128/ 09.10.2024	8100/-	54-55
31	P26791 11.10.2024	700/-	28-29
32	GBMS0011687/ 22.10.2024	600/-	25-27
33	SOC24003824 29.10.2024	600/-	24
34	P28380 29.10.2024	700/-	50 & 52
35	OPCA25/420840 04.11.2024	150/-	19
36	OPCA25/339019 21.09.2024	260/-	16-18
37	OPCA25/339043 21.09.2024	2700/-	16-18
38	OPCA25/342332 23.09.2024	135/-	19
39	OPCA25/342266 23.09.2024	500/-	15
40	OPCA25/342981 23.09.2024	4800/-	15
41	240926027 26.09.2024	1800/-	14
42	OPCA25/351886 27.09.2024	1000/-	13
43	LAB2425/7767/ 01.10.2024	5290/-	33-38
44	4780 03.10.2024	200/-	30-32
45	41003603843 05.10.2024	2500/-	2
46	41003603770 05.10.2024	2500/-	1
47	GEN2425/2128/ 09.10.2024	840/-	54-55
48	GEN2425/2128/ 09.10.2024	4928/-	54-55
49	GBMS0012657/ 29.10.2024	1800/-	20-23
50	GEN2425/2128/ 09.10.2024	11500/-	54-55
51	GEN2425/2128/ 09.10.2024	185750/-	54-55
52	GEN2425/2128/ 09.10.2024	21224/-	54-55

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SUMMARY

Details of bills of Shri Manoj Kumar Upadhyay, Dy.PM/Engg-ST for Indoor Treatment for LEFT FOLLICULAR THYROID NODULE.

Date of Admission: - 04.10.2024

Date of Discharge: - 09.10.2024

S. No.	Description	Page No.	
1	Application for reimbursement of indoor treatment		
2	Summary		
3	Treatment Summary / Discharge Summary	79-80	
Bills			
S. No.	Bill No./date	Gross amount of bill	CP No.
1	OCPA24-25/147843 21.09.2024	1369/-	78
2	C34180 04.10.2024	1487/-	77
3	C34299 05.10.2024	3152/-	75-76
4	C34356 05.10.2024	43/-	74
5	C34287 05.10.2024	13050/-	73
6	C34218 05.10.2024	1141/-	72
7	C34270 05.10.2024	12549/-	69-71
8	R3300 05.10.2024	-4448/-	68
9	C34469 06.10.2024	253/-	67
10	C34411 06.10.2024	3422/-	65-66
11	C34476 06.10.2024	77/-	64
12	C34537 07.10.2024	3007/-	62-63
13	C34778 08.10.2024	2694/-	61
14	C34486 07.10.2024	56/-	60
15	C34851 08.10.2024	722/-	59
16	C34866 08.10.2024	72/-	58
17	C34924 09.10.2024	2596/-	57
18	R3361 09.10.2024	-651/-	56
19	GEN2425/2128/ 09.10.2024	725/-	54-55
20	INV/16382 11.10.2024	500/-	50-51
21	C8459 15.10.2024	154/-	49
22	C8936 24.10.2024	250/-	48

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	23	C9081 27.10.2024	115/-	47
	24	OCPA25/341442 23.09.2024	150/-	45-46
	25	P25356 26.09.2024	1500/-	40-41
	26	OCPA25/340890 23.09.2024	150/-	43-46
	27	GBMS0008880/ 01.10.2024	1350/-	33-39
	28	4780 03.10.2024	1000/-	30-32
	29	GEN2425/2128/ 09.10.2024	400/-	54-55
	30	GEN2425/2128/ 09.10.2024	8100/-	54-55
	31	P26791 11.10.2024	700/-	28-29
	32	GBMS0011687/ 22.10.2024	600/-	25-27
	33	SOC24003824 29.10.2024	600/-	24
	34	P28380 29.10.2024	700/-	50 & 52
	35	OCPA25/420840 04.11.2024	150/-	19
	36	OCPA25/339019 21.09.2024	260/-	16-18
	37	OCPA25/339043 21.09.2024	2700/-	16-18
	38	OCPA25/342332 23.09.2024	135/-	19
	39	OCPA25/342266 23.09.2024	500/-	15
	40	OCPA25/342981 23.09.2024	4800/-	15
	41	240926027 26.09.2024	1800/-	14
	42	OCPA25/351886 27.09.2024	1000/-	13
	43	LAB2425/7767/ 01.10.2024	5290/-	33-38
	44	4780 03.10.2024	200/-	30-32
	45	41003603843 05.10.2024	2500/-	2
	46	41003603770 05.10.2024	2500/-	1
	47	GEN2425/2128/ 09.10.2024	840/-	54-55
	48	GEN2425/2128/ 09.10.2024	4928/-	54-55
	49	GBMS0012657/ 29.10.2024	1800/-	20-23
	50	GEN2425/2128/ 09.10.2024	11500/-	54-55
	51	GEN2425/2128/ 09.10.2024	185750/-	54-55
	52	GEN2425/2128/ 09.10.2024	21224/-	54-55



Dy. PM/Engg/ST
10.12.2024

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SUMMARY

Details of bills of Shri Manoj Kumar Upadhyay, Dy.PM/Engg-ST for Indoor Treatment for LEFT FOLLICULAR THYROID NODULE.

Date of Admission: - 04.10.2024

Date of Discharge: - 09.10.2024

S. No.	Description		Page No.
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	Bills		
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3	C34299 05.10.2024	3152/-	75-76
4	C34356 05.10.2024	43/-	74
5	C34287 05.10.2024	13050/-	73
6	C34218 05.10.2024	1141/-	72
7	C34270 05.10.2024	12549/-	69-71
8	R3300 05.10.2024	-4448/-	68
9	C34469 06.10.2024	253/-	67
10	C34411 06.10.2024	3422/-	65-66
11	C34476 06.10.2024	77/-	64
12	C34537 07.10.2024	3007/-	62-63
13	C34778 08.10.2024	2694/-	61
14	C34486 07.10.2024	56/-	60
15	C34851 08.10.2024	722/-	59
16	C34866 08.10.2024	72/-	58
17	C34924 09.10.2024	2596/-	57
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19	GEN2425/2128/ 09.10.2024	725/-	54-55
20	INV/16382 11.10.2024	500/-	50-51
21	C8459 15.10.2024	154/-	49
22	C8936 24.10.2024	250/-	48

Dy.PM/Engg/ST
10.12.2024

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6. Misuse, fraudulent use, false declaration, or false claims for reimbursement will render me liable to refund the amount with penal interest besides initiation of disciplinary action as per extant rules.



Dy.PM/Engg/ST

Signature of the employee

Date

10.12.2024

Recommendation of the Controlling Officer

Name:

Designation:

12	Kiran Multi Super Specialty Hospital, Surat	OPCA25/420840 04.11.2024	150/-	150/-
C	Investigation charges			15400/-
1	Kiran Multi Super Specialty Hospital, Surat	OPCA25/339019 21.09.2024	260/-	260/-
2	Kiran Multi Super Specialty Hospital, Surat	OPCA25/339043 21.09.2024	2700/-	2700/-
3	Kiran Multi Super Specialty Hospital, Surat	OPCA25/342332 23.09.2024	135/-	135/-
4	Kiran Multi Super Specialty Hospital, Surat	OPCA25/342266 23.09.2024	500/-	500/-
5	Kiran Multi Super Specialty Hospital, Surat	OPCA25/342981 23.09.2024	4800/-	4800/-
6	Synergy Imaging, Surat	240926027 26.09.2024	1800/-	1800/-
7	Kiran Multi Super Specialty Hospital, Surat	OPCA25/351886 27.09.2024	1000/-	1000/-
8	Unique Hospital, Surat	LAB2425/7767/ 01.10.2024	5290/-	5290/-
9	Shivam Chest Clinic, Surat	4780 03.10.2024	200/-	200/-
10	Neuberg Abha, Surat	41003603843 05.10.2024	2500/-	2500/-
11	Neuberg Abha, Surat	41003603770 05.10.2024	2500/-	2500/-
12	Unique Hospital, Surat	GEN2425/2128/ 09.10.2024	840/-	840/-
13	Unique Hospital, Surat	GEN2425/2128/ 09.10.2024	4928/-	4928/-
14	Sunshine Global Hospital, Surat	GBMS0012657/ 29.10.2024	1800/-	1800/-
D	Room Rent (Semi Special) Unique Hospital, Surat	GEN2425/2128/ 09.10.2024	11500/-	11500/-
E	Operation Charges Unique Hospital, Surat	GEN2425/2128/ 09.10.2024	185750/-	185750/-
F	Nursing Care Service Charges (10.00%) Unique Hospital, Surat	GEN2425/2128/ 09.10.2024	21224/-	21224/-
GROSS TOTAL:			3,05,462/-	3,05,462/-

* All bills/cash-memos (in original)/supporting prescriptions (clearly indicating the diagnosis)/reports duly verified must be enclosed.

DECLARATION/UNDERTAKING:

1. The claim for reimbursement is being made for self/family members, who are covered under the definition of 'Family' under the DFCCIL Medical Rules as on the date of treatment.
2. The amount claimed is only for in respect of treatment of specified **Special Disease** only. No other medicines/expenses are claimed for reimbursement.
3. The claimed expenditure has actually been incurred by me.
4. In case of multiple diseases covered in the same prescription, the amount claimed is restricted to the treatment of specified **Special Disease** only.
5. Reimbursement is claimed for only one system of treatment for the specified **Special Disease** only.

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9	Unique Pharmacy, Surat	C34469 06.10.2024	253/-	253/-
10	Unique Pharmacy, Surat	C34411 06.10.2024	3422/-	3422/-
11	Unique Pharmacy, Surat	C34476 06.10.2024	77/-	77/-
12	Unique Pharmacy, Surat	C34537 07.10.2024	3007/-	3007/-
13	Unique Pharmacy, Surat	C34778 08.10.2024	2694/-	2694/-
14	Unique Pharmacy, Surat	C34486 07.10.2024	56/-	56/-
15	Unique Pharmacy, Surat	C34851 08.10.2024	722/-	722/-
16	Unique Pharmacy, Surat	C34866 08.10.2024	72/-	72/-
17	Unique Pharmacy, Surat	C34924 09.10.2024	2596/-	2596/-
18	Unique Pharmacy, Surat	R3361 09.10.2024	-651/-	-651/-
19	Unique Hospital, Surat	GEN2425/2128/ 09.10.2024	725/-	725/-
20	Ayansh Pharmacy & Pharmaceutical, Surat	INV/16382 11.10.2024	500/-	500/-
21	Bharat Medical, Surat	C8459 15.10.2024	154/-	154/-
22	Bharat Medical, Surat	C8936 24.10.2024	250/-	250/-
23	Bharat Medical, Surat	C9081 27.10.2024	115/-	115/-

B Consultation charges

1	Kiran Multi Super Specialty Hospital, Surat	OCPA25/341442 23.09.2024	150/-	150/-
2	Pratham Endocrine & Diabetes Centre, Surat	P25356 26.09.2024	1500/-	1500/-
3	Kiran Multi Super Specialty Hospital, Surat	OCPA25/340890 23.09.2024	150/-	150/-
4	Sunshine Global Hospital, Surat	GBMS0008880/ 01.10.2024	1350/-	1350/-
5	Shivam Chest Clinic, Surat	4780 03.10.2024	1000/-	1000/-
6	Unique Hospital, Surat	GEN2425/2128/ 09.10.2024	400/-	400/-
7	Unique Hospital, Surat	GEN2425/2128/ 09.10.2024	8100/-	8100/-
8	Pratham Endocrine & Diabetes Centre, Surat	P26791 11.10.2024	700/-	700/-
9	Sunshine Global Hospital, Surat	GBMS0011687/ 22.10.2024	600/-	600/-
10	Sunshine Global Hospital, Surat	SOC24003824 29.10.2024	600/-	600/-
11	Pratham Endocrine & Diabetes Centre, Surat	P28380 29.10.2024	700/-	700/-

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Annexure-III

Sub: Reimbursement of medical expenses on Indoor Treatment under DFCCIL Medical Rules.

1	Name of the employee	Manoj Kumar Upadhyay		
2	Employee Code	101129		
3	Designation & Place of posting	Dy. PM/Engg-ST under Vadodara Unit		
4	Scale of Pay & Basic Pay	Rs. 93,100/-		
5	Name of the patient	Manoj Kumar Upadhyay		
6	Employee's Relationship with the patient.	Self		
7	Name & Address of the Hospital	Unique Hospital, Nr. Kiran Motors, Opp. Unique Hospital B.R.T.S Junction, Civil Hospital Char Rasta-Sosyo Circle Lane, Off Ring Road, Surat		
8	Registration No. of the hospital with Central/State Govt./Local Bodies:	Hospital Reg. No. B-27/402 & Doctor Reg. No. G-7828 Pre-Accredited by NABH-National Accreditation		
9	Date of Admission in the hospital	04.10.2024		
10	Date of Discharge from the hospital	09.10.2024		
11	Diagnosis of the ailment and treatment given in brief.	Diagnosis: - LEFT FOLLICULAR THYROID NODULE S/O-SUBTOTAL THYROIDECTOMY DONE BY DR. FARIDA WADIA (REG.NO. G-7828) & DR. ALOK KARULKAR Treatment given: - IV FLUID INJ.ZOSTUM 3GM IV BD INJ.OMEZ 40MG IV BD INJ. DYNAPAR 1AMP IV TDS INJ. CONTRAMOL 100MG IV TDS INJ. EMSET 8MG IV TDS INJ. DEXONA 2ML IV BD TAB. ROCALTROL P.O 2--2--2---2 TAB. SHELCAL 500MG P/O 2--2--2--2		
12	Details of the amount claimed are given below:			
13	Details of the amount claimed (attach details as per format below in a separate sheet, if the space is not adequate)			
14	Details	Bill No./date	Gross amount of	Amount claimed*
A	Medicines			
1	Kiran Medical Store, Surat	OCPA24-25/147843 21.09.2024	1369/-	1369/- ✓
2	Unique Pharmacy, Surat	C34180 04.10.2024	1487/-	1487/- ✓
3	Unique Pharmacy, Surat	C34299 05.10.2024	3152/-	3152/- ✓
4	Unique Pharmacy, Surat	C34356 05.10.2024	43/-	43/- ✓
5	Unique Pharmacy, Surat	C34287 05.10.2024	13050/-	13050/- ✓
6	Unique Pharmacy, Surat	C34218 05.10.2024	1141/-	1141/- ✓
7	Unique Pharmacy, Surat	C34270 05.10.2024	12549/-	12549/- ✓
8	Unique Pharmacy, Surat	R3300 05.10.2024	-4448/-	-4448/- ✓

**Kiran Medical Store**Nr Sumul Dairy, Surat-395004 Phone :0261-
7161111**TAX INVOICE
Original Copy**Stat Code : 24 | GST Tin No.: 24AAMTS5310F1ZM
DRUG LIC NO : 20-21/224602/03/158467(SCH.X)
FSSAI NO : 20719031000746

UHID : 245596

Patient Name : MR. MANOJ KUMAR KAILASH BABU UPADHYAY
Address : E-504, TIRUPATI SHYAM VILLA, BHIMRAD CANAL ROAD,
Payer : Cash

Patient GST No.:

Age/Gender: 56 Year Male

Bill No : CPOP24-25/147843

Bill Date : 21/09/2024 4:20 PM

Doctor : Dr. NANDITA PATEL

Indent By :

(78)

Indent No. :

SN	Particulars	HSN	Pkg.	Batch	Expiry	Qty	MRP	Amount	Disc Amt	Taxable	GST %	GST Amt	Net Amt
1	ANTIFLU CAP	3004	1x10	4BA1315	06/2028	5	879.32	439.66	43.97	353.29	12	42.40	395.69
2	DOLO 650 TAB	3004	1x15	DOBS3610	03/2028	10	33.76	22.51	4.50	16.09	12	1.92	18.01
3	PSORTOP OINT 15GM	3004	Nos	R541	01/2026	1	399.00	399.00	79.80	285.00	12	34.20	319.20
4	SKYN-SLEEK CREAM 100GM	3001	Nos	S648	06/2026	1	300.00	300.00	60.00	214.28	12	25.72	319.20
5	MOZZEE TABLET	3004	1x10 (Nos)	AT12278	10/2025	10	495.00	495.00	99.00	335.60	18	60.40	396.00
TOTAL													1368.90
Taxable	SGST%	SGST Amt	CGST%	CGST Amt									
868.66	6	52.12	6	52.12									
335.60	9	30.20	9	30.20									
204.26		82.32		82.32									
Net Amt													1368.90

Gross Amount :	1656.17
Discount Amt :	287.27
Round off Amt :	0.10
Net Amount :	1369.00

Shivani⁶

Jury

Signature
RAGHAVKUMAR GANESH DAVE
Central Pharmacy Store**Get Well Soon !**

- Goods once sold cannot be taken back or exchanged if partially used. Unpacked or Unsealed goods / medicines will not be accepted.
- For any exchange or return of medicines, original invoice is mandatory & Return of goods will be accepted within 15 days.
- Return of sale tablet / Capsules will be accepted only in multiple of 5 or 10 less than 5 tablet / capsule will not accepted.
- Return of cold chain / cold storage medicine will not be accepted.

* All disputes are subject to Surat Jurisdiction.

Printed By : RAGHAVKUMAR.D

Printed On : 21/09/2024 16:19 PM

1 of 1



Unique Hospital
multi-speciality & research institute

Run By : Surat Lifecare Pvt. Ltd

MEDICINE PRESCRIPTION

PT NAME : MANOJKUMAR KAILASHBABU UPADHYAY **CODE :** 10909
DR. NAME : DR. FARIDA WADIA **IPD No:** I/1024/54
LOGIN NAME : DR. GYANESHWAR PATIL **ID :** 461
ROOM NO : SS-2008 **DATE :** 4-Oct-24
PREPARE BY : DR RONAK **TIME :** 10:25:58 pm

SR.NO.	MEDICINE NAME	QTY
1	EASY GLIDE	3
2	EXAMINATION GLOVES - M	10
3	GNR VENFLON 20	1
4	EASY FIX	1
5	D.SYRING 10ML	3
6	IV SET	1
7	NS 500ML	1
8	D.SYRING 5ML	2
9	VEIN O LINE 10 CM	1

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD, OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
Customer : MANOJKUMAR K UPADHYAY
Doctor : DR FARIDA WADIA

INVOICE

CASH MEMO

GST Tin: 24AARC8396M1Z9
D.L.NO.20 SUR 105256/21 SUR 105257/GST:2

ORIGINAL

Area: -

Bill No : C34180 04/10/2024 22:44
Detail :

Sr.	Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	SGST		CGST		Amount
										Rate	Value	Rate	Value	
1	EASY GLIDE	010923	09/26	1	45.00	3	45.00	10.00	108.48	6.00	6.51	6.00	6.51	121.50
2	EXAMINATION GLOVES M	SHLEG022	06/26	1	250.00	1	250.00	10.00	200.89	6.00	12.05	6.00	12.05	225.00
3	VENFLON NO 120 BD	4150345	04/29	1	311.50	1	311.50	10.00	250.31	6.00	15.02	6.00	15.02	280.35
4	CURAFIX IV CANTROL	2351212209	11/28	1	176.00	1	176.00	10.00	141.43	6.00	8.49	6.00	8.49	158.40
5	SYRINGE 10 ML BD	24G30MB201	06/29	1	28.60	3	28.60	10.00	68.95	6.00	4.14	6.00	4.14	77.22
6	IV SET ROMSON	G24B020640	01/29	1	180.00	1	180.00	10.00	144.64	6.00	8.68	6.00	8.68	162.00
7	NS 500 ML ECOFLEX	1H244716	07/27	1	98.48	1	98.48	10.00	79.14	6.00	4.75	6.00	4.75	88.63
8	SYRINGE 5 ML BD	24D25M8202	04/29	1	18.15	2	18.15	10.00	29.17	6.00	1.75	6.00	1.75	32.67
9	VEIN O LINE 10 CM	G24F011142	05/29	1	379.00	1	379.00	10.00	304.55	6.00	18.27	6.00	18.27	341.10

You Save : Rs. 165.08

14	165.21	1327.56	79.65	79.65	1486.87
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OTHER +/-	0.00
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ROUND OFF	0.13
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E. & O.E.

NET **1487.00**



76

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
 NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
 Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPEMACHINE)
 Doctor : DR FARIDA WADIA

INVOICE



GST Tin: 24AARCS8396M1Z9

D.L.NO.20 SUR 105256/21 SUR 105257/GST:

Area: -

Bill No : C34299

05/10/2024 15:15

Detail :

Sr.	Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Taxable Value	SGST		CGST		Amount	
									Disc%	Rate	Value	Rate		
1	DNS 500 ML NIRLIFE	1E242455	04/27	1	42.80	4	42.80	10.00	137.57	6.00	8.25	6.00	8.25	154.08
2	ZOSTUM 3 GM INJ	Z01BH24026	05/26	1	937.05	2	937.05	10.00	1505.97	6.00	90.36	6.00	90.36	1686.69
3	NS 100 ML ECOFLEX	2H241479	07/27	1	47.10	8	47.10	10.00	302.79	6.00	18.17	6.00	18.17	339.12
4	OMEZ 40 MG INJ	P40012	11/26	1	52.50	2	52.50	10.00	84.38	6.00	5.06	6.00	5.06	94.50
5	DYNATROY AQ 1 ML INJ	PA24025	02/26	1	39.60	3	39.60	10.00	95.46	6.00	5.73	6.00	5.73	106.92
6	SUPRIDOL 2ML INJ	KP1568107	04/26	1	26.38	3	26.38	10.00	63.59	6.00	3.82	6.00	3.82	71.23
7	EMESET 4 ML INJ	4S60127	05/27	1	26.70	3	26.70	10.00	64.37	6.00	3.86	6.00	3.86	72.09
8	DEXONA 2 ML INJ	N400900	12/25	1	11.40	3	11.40	10.00	27.48	6.00	1.65	6.00	1.65	30.78
9	ALPRAX 0.5 MG TAB	2E10L009	02/27	15	73.50	5	4.90	0.00	21.88	6.00	1.31	6.00	1.31	24.50
10	SYRINGE 10 ML BD	24G30M8201	06/29	1	28.60	3	28.60	10.00	68.95	6.00	4.14	6.00	4.14	77.22

OTHER +/- CONTINUE ON
 ROUND OFF NEXT PAGE..

BILL CONTINUE..

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

NET

**UNIQUE PHARMACY**

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
 NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
 Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPEMACHINE)
 Doctor : DR FARIDA WADIA

INVOICE

CREDIT MEMO

GST Tin: 24AARCS8396M1Z9

D.L.NO.20 SUR 105256/21 SUR 105257/GST:

Area: -

Bill No : C34299

05/10/2024 15:15

Detail :

Sr.	Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Taxable Value	SGST		CGST		Amount	
									Disc%	Rate	Value	Rate		
11	SYRINGE 5 ML BD	24D25M8202	04/29	1	18.15	3	18.15	10.00	43.75	6.00	2.63	6.00	2.63	49.01
12	NEEDLE NO 18 1 1/5	4096264	03/29	1	6.50	5	6.50	10.00	26.12	6.00	1.57	6.00	1.57	29.25
13	I V SET ROMSON	G24E020781	04/29	1	180.00	1	180.00	10.00	144.64	6.00	8.68	6.00	8.68	162.00
14	EXAMINATION GLOVES M	SHLEG022	06/26	1	250.00	1	250.00	10.00	200.89	6.00	12.05	6.00	12.05	225.00
15	PLASTIC GLOVES STERILE	003	07/26	1	6.50	5	6.50	10.00	24.79	9.00	2.23	9.00	2.23	29.25

You Save : Rs. 347.09

51	347.46	2812.63	169.50	169.50	3151.64
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OTHER +/-	0.00
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ROUND OFF	0.36
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E. & O. E.

NET

3152.00

Rupees Three Thousand One Hundred Fifty Two Only

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999



75

A(3)



Unique Hospital
multi speciality & research institute

Run By : Surat Lifecare Pvt. Ltd

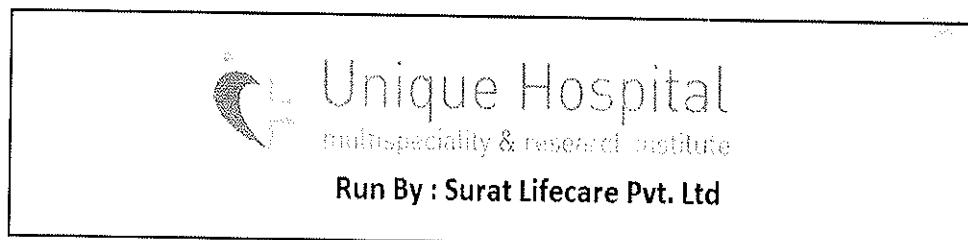
MEDICINE PRESCRIPTION

PT NAME	: MANOJKUMAR KAILASHBABU UPADHYAY	CODE : 10909
DR. NAME	DR. FARIDA WADIA	IPD No : I/1024/54
LOGIN NAME	ICU - 1	ID : 532
ROOM NO	SS-2008	DATE : 5-Oct-24
PREPARE BY	ANUKSHA	TIME : 2:57:34 pm

SR.NO.	MEDICINE NAME	QTY
1	DNS 500 ML NIRLIFE	4
2	ZOSTUM 3 GM INJ	2
3	NS 100 ML	8
4	OMEZ 40 MG INJ	2
5	DYNAPAR AQ	3
6	CONTRAMOL 100MG	3
7	EMESET 4 ML INJ	3
8	DEXONA 2 ML INJ	3
9	ANXIT 0.5MG TAB	5
10	DIS SYRINGE 10CC	3
11	DISPO SYRINGE 5CC	3
12	D.NEEDLE 18. 1/5	5
13	IV SET	1
14	EXAMINATION GLOVES (25PC)	1
15	PLASTIC GLOVES STERILE	5

74

CUG No.							
	8535099329						
	8409908671						
	7484973382						
	6351308561						
	8875469853						
	7227938749						
	9328903879						
	9328903878						
	9316751620						
	7041849223						

**MEDICINE PRESCRIPTION**

PT NAME	: MANOJKUMAR KAILASHBABU UPADHYAY	CODE : 10909
DR. NAME	: DR. FARIDA WADIA	IPD No : I/1024/54
LOGIN NAME	: DR. BHARTI MAHENDRAKAR	ID : 555
ROOM NO	: SS-2008	DATE : 5-Oct-24
PREPARE BY	: DR. KAMLESH	TIME : 7:36:17 pm
SR.NO.	MEDICINE NAME	QTY
1	SHELCAL 500MG TAB	5

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPE MACHINE)
Doctor : DR FARIDA WADIA

INVOICE

ORIGINAL



Bill No : C34356

05/10/2024 19:41

Detail :

Sr. Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	SGST Rate	CGST Rate	Amount
1 SHELCAL 500 MG TAB	OLV2L281	04/26	15	144.30	5	9.62	10.00	38.65	6.00	2.32	43.29
You Save : Rs. 5.10											
Rupees Fourty Three Only											

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

E. & O. E.

NET**43.00**

P

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT

Customer : MANOJKUMAR K UPADHYAY (QR CODE)
Doctor : DR FARIDA WADIA

INVOICE**CREDIT MEMO**

GST Tin: 24AARCS8396M1Z9

D.L.NO.20 SUR 105256/21 SUR 105257/GST:2

ORIGINAL

Area: -

Bill No : C34287

05/10/2024 13:56

Detail :

Sr.	Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Value	Taxable		SGST		CGST		Amount
										Rate	Value	Rate	Value	Rate	Value	
1	ENDOTRACHEAL TUBE NO 7.5 ARMMO	G24E011038	04/29	1	2250.00	1	2250.00	10.00	1808.04	6.00	108.48	6.00	108.48	6.00	108.48	2025.00
2	HORIZON CLIP SMALL	73B2400363	02/29	1	586.00	10	586.00	10.00	4708.93	6.00	282.54	6.00	282.54	6.00	282.54	5274.00
3	HORIZON CLIP MEDIUM	23J2300926	09/28	1	705.00	5	705.00	10.00	2832.59	6.00	169.96	6.00	169.96	6.00	169.96	3172.50
4	HORIZON CLIP M.LARGE	73F2300550	06/28	1	840.00	3	840.00	10.00	2025.00	6.00	121.50	6.00	121.50	6.00	121.50	2268.00
5	TERMIN INJ.	V307233	03/27	1	345.00	1	345.00	10.00	277.23	6.00	16.63	6.00	16.63	6.00	16.63	310.50

You Save : Rs. 1450.00

20 1450.00 11651.79

699.11 699.11 13050.00

OTHER +/- 0.00

ROUND OFF 0.00

Rupees Thirteen Thousand Fifty Only

E. & O. E. **NET** 13050.00

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999



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72



Unique Hospital
multispeciality & research institute

Run By : Surat Lifecare Pvt. Ltd

MEDICINE PRESCRIPTION

PT NAME : MANOJKUMAR KAILASHBABU UPADHYAY **CODE :** 10909
DR. NAME : DR. FARIDA WADIA **IPD No :** I/1024/54
LOGIN NAME : DR. GYANESHWAR PATIL **ID :** 478
ROOM NO : SS-2008 **DATE :** 5-Oct-24
PREPARE BY : DR RAKESH **TIME :** 8:41:17 am

SR.NO.	MEDICINE NAME	QTY
1	ZOSTUM 3 GM INJ	1
2	OMEZ 40 MG INJ	1
3	DEXONA 2 ML INJ	1
4	EMESET 4 ML INJ	1
5	ATEN 25 MG TAB	5
6	D.NEEDLE 18, 1/5	5
7	NS 500ML	1
8	INJ, NS 100ML	2

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPE MACHINE)
Doctor : DR FARIDA WADIA

INVOICE

CREDIT MEMO GST In: 24AARC8396M1Z9

VOLO: 20 SUR 105256/21 SUR 105257/GST:

ORIGINAL

Area: -

BILL NO : C34218

05/10/2024 08:55

Detail :

Sr.	Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	SGST Rate	SGST Value	CGST Rate	CGST Value	Amount
1	ZOSTUM 3 GM INJ	Z01BH24026	05/26	1	937.05	1	937.05	10.00	752.99	6.00	45.18	6.00	45.18	843.35
2	OMEZ 40 MG INJ	P40012	11/26	1	52.50	1	52.50	10.00	42.19	6.00	2.53	6.00	2.53	47.25
3	DEXONA 2 ML INJ	N400900	12/25	1	11.40	1	11.40	10.00	9.16	6.00	0.55	6.00	0.55	10.26
4	EMESET 4 ML INJ	4S60127	05/27	1	26.70	1	26.70	10.00	21.46	6.00	1.29	6.00	1.29	24.03
5	ATEN 25 MG TAB	I401128	01/26	14	30.65	7	2.19	10.00	12.31	6.00	0.74	6.00	0.74	13.79
6	NEEDLE NO 18 1 1/5	4096264	03/29	1	6.50	5	6.50	10.00	26.12	6.00	1.57	6.00	1.57	29.25
7	NS 500 MLECOFLEX	1H244716	07/27	1	98.48	1	98.48	10.00	79.14	6.00	4.75	6.00	4.75	88.63
8	NS 100 ML ECOFLEX	2H241479	07/27	1	47.10	2	47.10	10.00	75.70	6.00	4.54	6.00	4.54	84.78

You Save : Rs. 127.16

61.14 61.14 1141.34

OTHER +/- 0.00

ROUND OFF -0.34

Rupees One Thousand One Hundred Fourty One Only

E. & O. E.

NET 1141.00

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UNIQUE PHARMACY

INVOICE

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
Customer : MANOJKUMAR K UPADHYAY (QR CODE)
Doctor : DR FARIDA WADIA

ORIGINAL

Area: -

CREDIT MEMO / GST Tin: 24AARCS8396M1Z9

DL.NO.20 SUR 105256/21 SUR 105257/GST:2

Bill No : C34270

05/10/2024 12:49

Detail :

Sr.	Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	/ Unit	Sale Rate	Disc%	Value	Taxable		SGST		CGST		Amount
											Rate	Value	Rate	Value	Rate	Value	
1	VENFLON NO 1 20 BD	4150345	04/29	1	311.50	1	311.50	10.00		250.31	6.00	15.02	6.00	15.02	6.00	280.35	
2	I V SET ROMSON	G24E020781	04/29	1	180.00	1	180.00	10.00		144.64	6.00	8.68	6.00	8.68	6.00	162.00	
3	RL 500 ML NIRLIFE	1G244092	06/27	1	63.27	2	63.27	10.00		101.68	6.00	6.10	6.00	6.10	6.00	113.89	
4	DNS 500 ML NIRLIFE	1E242455	04/27	1	42.80	2	42.80	10.00		68.79	6.00	4.13	6.00	4.13	6.00	77.04	
5	NS 100 ML ECOFLEX	2H241479	07/27	1	47.10	1	47.10	10.00		37.85	6.00	2.27	6.00	2.27	6.00	42.39	
6	NS 500 ML ECOFLEX	1H244716	07/27	1	98.48	2	98.48	10.00		158.27	6.00	9.50	6.00	9.50	6.00	177.26	
7	NS 1000 ML NIRLIFE	2H241448	07/27	1	65.25	2	65.25	10.00		104.87	6.00	6.29	6.00	6.29	6.00	117.45	
8	SYRINGE 10 ML BD	24G30M8201	06/29	1	28.60	5	28.60	10.00		114.91	6.00	6.89	6.00	6.89	6.00	128.70	
9	SYRINGE 5 ML BD	24D25M8202	04/29	1	18.15	3	18.15	10.00		43.75	6.00	2.63	6.00	2.63	6.00	49.01	
10	SYRINGE 2 ML BD	23G24M8202	08/28	1	13.20	2	13.20	10.00		21.21	6.00	1.27	6.00	1.27	6.00	23.76	
11	NEEDLE NO 24 1 1/5	G231020566	08/28	1	3.60	2	3.60	10.00		5.79	6.00	0.35	6.00	0.35	6.00	6.48	
12	VEIN O LINE 10 CM	G24F011142	05/29	1	379.00	1	379.00	10.00		304.55	6.00	18.27	6.00	18.27	6.00	341.10	
13	VEIN O LINE 100 CM	G24F010559	05/29	1	433.00	1	433.00	10.00		347.95	6.00	20.88	6.00	20.88	6.00	389.70	
14	ECG ELECTRODE	21724S08G0	05/26	1	31.50	5	31.50	10.00		126.56	6.00	7.59	6.00	7.59	6.00	141.75	
15	ENDOTRACHEAL TUBE 7.5 NO CUFFE	G24D011036	03/29	1	392.00	1	392.00	10.00		315.00	6.00	18.90	6.00	18.90	6.00	352.80	
16	ROMOLENE NO 14	G230310743	02/28	1	77.00	1	77.00	10.00		61.88	6.00	3.71	6.00	3.71	6.00	69.30	
17	PYROLATE INJ	KP1254122	01/27	1	16.12	1	16.12	10.00		12.95	6.00	0.78	6.00	0.78	6.00	14.51	
18	PARACIP IV	AFR24048	04/26	1	617.36	1	617.36	10.00		496.09	6.00	29.77	6.00	29.77	6.00	555.62	
19	TROYPOFOL 20 ML INJ	PF24006	04/27	1	145.60	2	145.60	10.00		234.00	6.00	14.04	6.00	14.04	6.00	262.08	
20	ARTACIL 10 ML VIAL	1305107	08/25	1	190.05	1	190.05	10.00		152.72	6.00	9.16	6.00	9.16	6.00	171.05	
21	MYO PYROLATE	V350397	09/25	1	123.70	1	123.70	10.00		99.40	6.00	5.96	6.00	5.96	6.00	111.33	
22	ABDOMINAL MOP 25 CM X 25 CM SA	CH161	05/27	1	850.00	1	850.00	10.00		683.04	6.00	40.98	6.00	40.98	6.00	765.00	
23	LOX 2 % ADRENALIN	SU1478264	01/25	1	35.27	1	35.27	10.00		28.34	6.00	1.70	6.00	1.70	6.00	31.74	
24	DEXONA 2 ML INJ	N400900	12/25	1	11.40	1	11.40	10.00		9.16	6.00	0.55	6.00	0.55	6.00	10.26	
25	VASOCON INJ (ADRENALIN)	KP85365	03/25	1	13.69	2	13.69	10.00		22.00	6.00	1.32	6.00	1.32	6.00	24.64	
26	NITROPLUS INJ	1431115	11/25	1	34.60	1	34.60	10.00		27.80	6.00	1.67	6.00	1.67	6.00	31.14	
27	TRANEXAWIN INJ	SAI-24130E	04/26	1	68.48	2	68.48	10.00		117.39	2.50	2.93	2.50	2.93	2.50	123.26	
28	SILKUS 1 5062(MERSILK)	240036BD	12/28	1	237.00	1	237.00	10.00		190.45	6.00	11.43	6.00	11.43	6.00	213.30	
29	ETHILON 3.0 NW 3328	V3011	10/28	1	257.00	1	257.00	10.00		206.52	6.00	12.39	6.00	12.39	6.00	231.30	
30	VICRYL 3-0 NW 2328	T3015	10/28	1	875.00	2	875.00	10.00		1406.25	6.00	84.38	6.00	84.38	6.00	1575.00	
31	MONOCRYL 3-0 NW 1326	T3068	07/28	1	929.00	1	929.00	10.00		746.52	6.00	44.79	6.00	44.79	6.00	836.10	
32	NEOSPORIN SKIN OINTMENT 30GM	OJ6Y	11/25	1	211.70	1	211.70	10.00		170.12	6.00	10.21	6.00	10.21	6.00	190.53	
33	PLAIN SHEET LARGE SAFE OPS	PS240912	08/27	1	144.00	1	144.00	10.00		115.71	6.00	6.94	6.00	6.94	6.00	129.60	
34	ZOSTUM 2GM	Z01B24007	05/26	1	708.50	1	708.50	10.00		569.33	6.00	34.16	6.00	34.16	6.00	637.65	
35	GAMMEX GLOVES 6 NO	22060106LC	06/25	1	105.00	2	105.00	10.00		168.75	6.00	10.13	6.00	10.13	6.00	189.00	
36	GAMMEX GLOVES 6.5 NO	22100203LC	10/25	1	114.00	2	114.00	10.00		183.21	6.00	10.99	6.00	10.99	6.00	205.20	
37	GAMMEX GLOVES 7 NO	2211201405	11/25	1	85.00	2	85.00	10.00		136.61	6.00	8.20	6.00	8.20	6.00	153.00	
38	GAMMEX GLOVES 7.5 NO	2311559304	11/26	1	114.00	2	114.00	10.00		183.21	6.00	10.99	6.00	10.99	6.00	205.20	
39	MICRO OPTIC 6 NO	240500721T	05/27	1	125.00	2	125.00	10.00		200.89	6.00	12.05	6.00	12.05	6.00	225.00	
40	MICRO OPTIC 6.5 NO GLOVES	240300281T	03/26	1	125.00	2	125.00	10.00		200.89	6.00	12.05	6.00	12.05	6.00	225.00	
41	MICRO OPTIC GLOVES 7.NO	240400381T	04/27	1	125.00	2	125.00	10.00		200.89	6.00	12.05	6.00	12.05	6.00	225.00	
42	MICRO OPTIC 7.5 GLOVES	230801911T	08/26	1	114.00	2	114.00	10.00		183.21	6.00	10.99	6.00	10.99	6.00	205.20	
43	DURAPORE 2 INCH	R04210313	03/26	1	1100.00	1	1100.00	10.00		883.93	6.00	53.04	6.00	53.04	6.00	990.00	
44	FLAT DRAIN SET	G24D011039	03/29	1	1710.00	1	1710.00	10.00		1374.11	6.00	82.45	6.00	82.45	6.00	1539.00	

You Save : Rs. 1393.99

72

1394.30 11211.53

12548.69

666.58
OTHER +
ROUND OFF

666.58

NET 12549.00

Rupees Twelve Thousand Five Hundred Fourty Nine Only

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

Mankurmer K. Upadhyay

Fazidu
wadie

5/10/24

- Inj. Diphenoxylate 1 mg / 10 ml
- Succinylcholine 112.5 mg / 25 ml (mg / ml)
- ✓ Inj. Paracetamol 100 ml (1)
- Inj. Fentanyl 100 µg / 1 ml
- ✓ Inj. Tramadol
- Inj. Barium (1 mg) / 2 ml
- Inj. Ketamine (2ml / 10 ml)
- ✓ Inj. Pancuronium (10ml / 25ml 50ml) (2)
- Inj. Vecuronium (4 mg / 10 ml)
- ✓ Inj. Atracurium (2.50 ml / 5 ml) (4)
- Inj. Rocuronium (5 ml / 10ml)
- Inj. Nefopamine (1ml / 5ml) Myopyrolate (1)
- Inj. Lasix
- Inj. Mannitol
- Inj. Edetate
- Inj. Dicyanophyllin
- Inj. Antrophenylate
- Inj. Terbutaline
- Inj. Avit
- ✓ Inj. Dexona (2)
- Inj. Physostigmine
- Inj. Solumedrol
- Inj. Betasol
- Inj. Octreotide 100 µg / 1 ml
- ✓ Inj. Adrenalin (2)
- Inj. Noradrenalin
- Inj. Dobutamine
- Inj. Dobutamime
- Inj. Mephenteramine
- Inj. NTO (25 mg / 10 mg) (1)
- NTO Patch (5 mg / 10 mg)
- Gas. Oxylin (5 mg / 10 mg)
- Gas. Isoproterenol
- Inj. Ecdysterone
- Inj. Cervaril 100 µg / 1 ml
- Inj. Cytokin (100 µg / 1 ml)
- Inj. Tropaeolin
- Inj. Calcium Gluconate
- Inj. Mannitol
- Inj. Silymarin
- Inj. Fructose 5%
- Inj. Glucagon
- Inj. Insulin

MOP → (5)

Jay 10x2 + 1. Ado;

✓ Ven. Tow No 20 (1)

✓ Jadi No.

✓ LV-Sat / Nitrog IV Sat (1)

• Measured Volume IV sat

• DI Sat

✓ 500ml (2)

• DIIS (10/25/50%)

• 0.4 NS / 0.45 DIIS

• Isotyde + P (100ml / 500ml)

• Isotyde M (100 ml / 500 ml)

• N.S. (100 ml / 500ml / 1 ml)

• N.S. / Glycine (3 Ltr)

• Heater / Voluvan 50 cc

• Gluco-Syringe 20 ml

✓ 5

✓ 3

• Fertina Syringe - 100 ml / 10 ml

• Dialysis

• 18/20/22/23/24 (1 Inch)

✓ 18/20/22/23/24 (1.5 Inch) (2)

• 25 (0.5 Inch)

• Vals Line (10/15/10/15/20/20 cm)

1+1

• Gluva

• PV Line 200 cm / 100 cm

• S.C.G. Chest Lead

✓ 5 (1)

✓ 10 (1)

• Fertina Catheter 14

• Fertina Catheter 16

• Fertina Catheter 18

• Fertina Catheter 20

• Fertina Catheter 22

• Fertina Catheter 24

• Fertina Catheter 26

• Fertina Catheter 28

• Fertina Catheter 30

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• Fertina Catheter 48

• Fertina Catheter 50

• Fertina Catheter 52

• Fertina Catheter 54

✓ 3

• Fertina Catheter 56

• Fertina Catheter 58

• Fertina Catheter 60

• Fertina Catheter 62

• Fertina Catheter 64

• Fertina Catheter 66

• Fertina Catheter 68

• Fertina Catheter 70

• Fertina Catheter 72

• Fertina Catheter 74

• Fertina Catheter 76

68

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURATCustomer : MANOJKUMAR K UPADHYAY
Doctor : DR FARIDA WADIA

S.RETURN/CREDIT NOTE

CASH MEMO

GST Tin: 24AARCS8396M1Z9

D.L.NO.20 SUR 105256/21 SUR 105257/GST:2

Original

Area:

Bill No : R3300

05/10/2024 13:54

Detail :

Sr.	Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	SGST		CGST		Amount
										Rate	Value	Rate	Value	
1	RL 500 ML NIRLIFE	1G244092	06/27	1	63.27	2	63.27	10.00	101.68	6.00	6.10	6.00	6.10	113.89
2	ZOSTUM 2GM	Z01B24007	05/26	1	708.50	1	708.50	10.00	569.33	6.00	34.16	6.00	34.16	637.65
3	ROMOLENE NO 14	G230310743	02/28	1	77.00	1	77.00	10.00	61.88	6.00	3.71	6.00	3.71	69.30
4	LOX 2 % ADRENALIN	SU1478275	02/25	1	35.27	1	35.27	10.00	28.34	6.00	1.70	6.00	1.70	31.74
5	PARACIP IV	AFR24048	04/26	1	617.36	1	617.36	10.00	496.09	6.00	29.77	6.00	29.77	555.62
6	NEOSPORIN SKIN OINTMENT 30GM	OJ6Y	11/25	1	211.70	1	211.70	10.00	170.12	6.00	10.21	6.00	10.21	190.53
7	TROPOFOL 20 ML INJ	PF24006	04/27	1	145.60	1	145.60	10.00	117.00	6.00	7.02	6.00	7.02	131.04
8	NS 100 ML ECOFLEX	2H241479	07/27	1	47.10	1	47.10	10.00	37.85	6.00	2.27	6.00	2.27	42.39
9	ENDOTRACHEAL TUBE 7.5 NO CUFFE	G24D011036	03/29	1	392.00	1	392.00	10.00	315.00	6.00	18.90	6.00	18.90	352.80
10	TRANEXAWIN INJ	SAI-24130E	04/26	1	68.48	2	68.48	10.00	117.39	2.50	2.93	2.50	2.93	123.26

OTHER +/- CONTINUE ON
ROUND OFF NEXT PAGE...

BILL CONTINUE..

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

E. & O. E. NET



Sr.	Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	Detail :				
										SGST Rate	SGST Value	CGST Rate	CGST Value	
11	I V SET ROMSON	G24E020781	04/29	1	180.00	1	180.00	10.00	144.64	6.00	8.68	6.00	8.68	162.00
12	VEIN O LINE 10 CM	G24F011142	05/29	1	379.00	1	379.00	10.00	304.55	6.00	18.27	6.00	18.27	341.10
13	GAMMEX GLOVES 6.5 NO	22100203LC	10/25	1	114.00	2	114.00	10.00	183.21	6.00	10.99	6.00	10.99	205.20
14	GAMMEX GLOVES 7 NO	2211201405	11/25	1	85.00	2	85.00	10.00	136.61	6.00	8.20	6.00	8.20	153.00
15	VASOCON INJ (ADRENALIN)	KP85365	03/25	1	13.69	2	13.69	10.00	22.00	6.00	1.32	6.00	1.32	24.64
16	VENFLON NO 1 20 BD	4150345	04/29	1	311.50	1	311.50	10.00	250.31	6.00	15.02	6.00	15.02	280.35
17	PYROLATE INJ	KP1254122	01/27	1	16.12	1	16.12	10.00	12.95	6.00	0.78	6.00	0.78	14.51
18	ETHILON 3-0 NW 3328	V3011	10/28	1	257.00	1	257.00	10.00	206.52	6.00	12.39	6.00	12.39	231.30
19	VICRYL 3-0 NW 2328	T3015	10/28	1	875.00	1	875.00	10.00	703.13	6.00	42.19	6.00	42.19	787.50

24 494.21 3978.60 234.61 234.61 4447.82

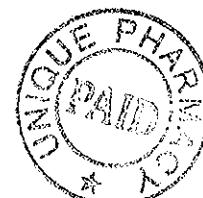
OTHER +/- 0.00
ROUND OFF 0.18

Rupees Four Thousand Four Hundred Fourty Eight Only

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

E. & O. E. NET 4448.00

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67



Unique Hospital

multi-speciality & research institute

Run By : Surat Lifecare Pvt. Ltd

MEDICINE PRESCRIPTION

PT NAME	: MANOJKUMAR KAILASHBABU UPADHYAY	CODE : 10909
DR. NAME	: DR. FARIDA WADIA	IPD No: I/1024/54
LOGIN NAME	: DR. ASIFTA SHAIKH	ID : 638
ROOM NO	: SS-2008	DATE : 6-Oct-24
PREPARE BY	: DR. MAHIMA	TIME : 7:31:27 pm

SR.NO.	MEDICINE NAME	QTY
1	CREMAFFIN	1

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT

Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPEMACHINE)
Doctor : DR FARIDA WADIA

INVOICE

CREDIT MEMO

GST fin: 24AARCS8396M1Z9

D1 NO 21-SUB 105256/21 SUB 105257/GST:2

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You Save : Rs. 27.86

Rupees Two Hundred Fifty Three Only

Software by VISUAL INFOSOFT PVT. LTD. | Customer Care No: 079 3520 7999

E 8.0 E

NET

253.00

66

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPEMACHINE)
Doctor : DR FARIDA WADIA

INVOICE**CREDIT MEMO**

GST Tin: 24AARCS8396M1Z9

D.L.NO.20 SUR 105256/21 SUR 105257/GST:2

ORIGINA

Area: -



Bill No : C34411

06/10/2024 11:54

Detail :

Sr. Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	SGST		CGST	
									Rate	Value	Rate	Value
1 ZOSTUM 3 GM INJ	Z01BH24026	05/26	1	937.05	2	937.05	10.00	1505.97	6.00	90.36	6.00	90.36
2 DEXONA 2 ML INJ	N400896	12/25	1	11.40	2	11.40	10.00	18.32	6.00	1.10	6.00	1.10
3 OMEZ 40 MG INJ	P40012	11/26	1	52.50	2	52.50	10.00	84.38	6.00	5.06	6.00	5.06
4 DYNATROY AQ 1 ML INJ	PA24025	02/26	1	39.60	3	39.60	10.00	95.46	6.00	5.73	6.00	5.73
5 SUPRIDOL 2ML INJ	KP1568084	01/26	1	26.38	3	26.38	10.00	63.59	6.00	3.82	6.00	3.82
6 EMESET 4 ML INJ	4S60127	05/27	1	26.70	3	26.70	10.00	64.37	6.00	3.86	6.00	3.86
7 ROCALTROL 0.25 CAP	RCA24001	01/26	10	343.67	10	34.37	10.00	276.16	6.00	16.57	6.00	16.57
8 SHELCAL 500 MG TAB	OLV2L304	04/26	15	144.30	10	9.62	10.00	77.30	6.00	4.64	6.00	4.64
9 DNS 500 ML NIRLIFE	1E242455	04/27	1	42.80	2	42.80	10.00	68.79	6.00	4.13	6.00	4.13
10 NS 100 ML ECOFLEX	2H241479	07/27	1	47.10	8	47.10	10.00	302.79	6.00	18.17	6.00	18.17

OTHER +/- CONTINUE ON
ROUND OFF NEXT PAGE..

NET

E. & O. E.

BILL CONTINUE..

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPEMACHINE)
Doctor : DR FARIDA WADIA

INVOICE**CREDIT MEMO**

GST Tin: 24AARCS8396M1Z9

D.L.NO.20 SUR 105256/21 SUR 105257/GST:2

ORIGINA

Area: -



Bill No : C34411

06/10/2024 11:54

Detail :

Sr. Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	SGST		CGST	
									Rate	Value	Rate	Value
11 SYRINGE 10 ML BD	24G30M8201	06/29	1	28.60	3	28.60	10.00	68.95	6.00	4.14	6.00	4.14
12 SYRINGE 5 ML BD	24D25M8202	04/29	1	18.15	2	18.15	10.00	29.17	6.00	1.75	6.00	1.75
13 NEEDLE NO 18 1	24462R	05/29	1	3.00	3	3.00	0.00	8.04	6.00	0.48	6.00	0.48
14 VENFLON NO 1 22 BD	4123386	04/29	1	311.50	1	311.50	10.00	250.31	6.00	15.02	6.00	15.02
15 CURAFIX IV CANTROL	2351212209	11/28	1	176.00	1	176.00	10.00	141.43	6.00	8.49	6.00	8.49

You Save : Rs. 378.81

55 379.18 3055.03 183.30 183.30 3421.63
OTHER +/- 0.00
ROUND OFF 0.37

NET**3422.00**

E. & O. E.

Rupees Three Thousand Four Hundred Twenty Two Only

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

A 10



Sr. No.	Item No.	Item of Work	Total Quantity	Basic Rate	% of LAR	Updated Basic Rate	Unit	Total	Reference
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Unique Hospital
multispeciality & research institute

Run By : Surat Lifecare Pvt. Ltd

65

MEDICINE PRESCRIPTION

PT NAME : MANOJKUMAR KAILASHBABU **CODE : 10909**
UPADHYAY
DR. NAME : DR. FARIDA WADIA **IPD No: I/1024/54**
LOGIN NAME : DR. ASIFTA SHAIKH **ID : 598**
ROOM NO : SS-2008 **DATE : 6-Oct-24**
PREPARE BY : DR.ASIFTA **TIME : 11:43:26 am**

SR.NO.	MEDICINE NAME	QTY
1	ZOSTUM 3 GM INJ	2
2	DEXONA INJ	2
3	OMEZ 40MG - INJECTION	2
4	DYNAPAR	3
5	CONTRAMOL 100MG	3
6	EMESET 4 ML INJ	3
7	ROCALTROL	10
8	SHELICAL 500 MG TAB	10
9	DNS 500ML	2
10	NS 100 ML	8
11	D.SYRING 10ML	3
12	D.SYRING 5ML	2
13	D.NEEDLE 18.	3
14	VENFLON 22	1
15	EASY FIX	1

A 10

64.



Unique Hospital

multispeciality & research institute

Run By : Surat Lifecare Pvt. Ltd

MEDICINE PRESCRIPTION

MEDICINE

PT NAME	: MANOJKUMAR KAILASHBABU UPADHYAY	CODE : 10909
DR. NAME	: DR. FARIDA WADIA	IPD No : 1/1024/54
LOGIN NAME	: DR. ASIFTA SHAIKH	ID : 645
ROOM NO	: SS-2008	DATE : 6-Oct-24
PREPARE BY	: DR RONAK	TIME : 10:14:24 pm
SR.NO.	MEDICINE NAME	Q
	DANG ECOMI	

ROOM NO : 3205 PREPARE BY : DR RONAK TIME : 10.14.21 PM
SR.NO. MEDICINE NAME QTY
1 INJ. DNS 500ML 2

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD, OPP KIRAN MOTOR,
NEAR CANAL CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT

Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPEMACHINE)
Doctor : DR FARIDA WADIA

Doctor Frankenstein

INVOICE

CREDIT MEMO

GST Tin: 24AARCS8396M1Z9

D.L.NO.20 SUR 105256/21 SUR 105257/GST:2

R/B SURAT LIFECARE PVT LTD. UPP KIRAN MOTOR,
NEAR CANAL CIVIL HOSPITAL CHAR RASTA SOSHO CIRCLE SURAT

ORIGINAL

Bill No : C34476

06/10/2024 22:24

Billings Detail

Sr.	Description	BatchNo	ExpDt	Unit	M.R.P.	Qly	Sale Rate		Taxable Value	SGST		CGST		Amount
							/ Unit	Disc%		Rate	Value	Rate	Value	
1	DNS 500 ML NIRLIFE	1E242455	04/27	1	42.80	2	42.80	10.00	68.79	6.00	4.13	6.00	4.13	77.04

You Save : Rs. 8.60

Rupees Seventy Seven Only

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

5805

NET

77.00



UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT

Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPEMACHINE)
Doctor : DR FARIDA WADIA

INVOICE

CREDIT MEMO

GST Tin: 24AARCS8396M1Z9

D.L.NO.20 SUR 105256/21 SUR 105257/GST:2

ORIGINAL

Area: -

Bill No : C34537

07/10/2024 10:54

Detail :

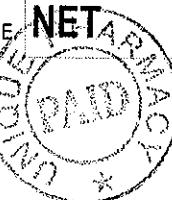
Sr.	Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	SGST		CGST		Amount
										Rate	Value	Rate	Value	
1	ZOSTUM 3 GM INJ	Z01BH24026	05/26	1	937.05	2	937.05	10.00	1505.97	6.00	90.36	6.00	90.36	1686.69
2	OMEZ 40 MG INJ	P40013	11/26	1	52.50	2	52.50	10.00	84.38	6.00	5.06	6.00	5.06	94.50
3	DYNATROY AQ 1 ML INJ	PA24025	02/26	1	39.60	3	39.60	10.00	95.46	6.00	5.73	6.00	5.73	106.92
4	SUPRIDOL 2ML INJ	KP1568084	01/26	1	26.38	3	26.38	10.00	63.59	6.00	3.82	6.00	3.82	71.23
5	EMESET 4 ML INJ	4S60127	05/27	1	26.70	3	26.70	10.00	64.37	6.00	3.86	6.00	3.86	72.09
6	ROCALTROL 0.25 CAP	RCA24002	01/26	10	343.67	10	34.37	10.00	276.16	6.00	16.57	6.00	16.57	309.30
7	SHELICAL 500 MG TAB	OLV2L304	04/26	15	144.30	10	9.62	10.00	77.30	6.00	4.64	6.00	4.64	86.58
8	NS 100 ML ECOFLEX	2H241479	07/27	1	47.10	8	47.10	10.00	302.79	6.00	18.17	6.00	18.17	339.12
9	DNS 500 ML NIRLIFE	1E242455	04/27	1	42.80	4	42.80	10.00	137.57	6.00	8.25	6.00	8.25	154.08
10	SYRINGE 10 ML BD	24G30M8201	06/29	1	28.60	3	28.60	10.00	68.95	6.00	4.14	6.00	4.14	77.22

OTHER +/- CONTINUE ON
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BILL CONTINUE..

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

E. & O. E.



UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPEMACHINE)
Doctor : DR FARIDA WADIA

INVOICE

CREDIT MEMO

GST Tin: 24AARCS8396M1Z9

D.L.NO.20 SUR 105256/21 SUR 105257/GST:2

ORIGINAL

Area: -

Bill No : C34537

07/10/2024 10:54

Detail :

Sr.	Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	SGST		CGST		Amount
										Rate	Value	Rate	Value	
11	NEEDLE NO 18 1	24462R	05/29	1	3.00	3	3.00	0.00	8.04	6.00	0.48	6.00	0.48	9.00

You Save : Rs. 332.81

51 333.08 2684.58 161.07 161.07 3006.73
OTHER +/- ROUND OFF

Rupees Three Thousand Seven Only

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

E. & O. E.

NET

3007.00



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(62)



Unique Hospital
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Run By : Surat Lifecare Pvt. Ltd

MEDICINE PRESCRIPTION

PT NAME	: MANOJKUMAR KAILASHBABU UPADHYAY	CODE : 10909
DR. NAME	: DR. FARIDA WADIA	IPD No : I/1024/54
LOGIN NAME	: DR. RONAK CHAUDHARI	ID : 673
ROOM NO	: SS-2008	DATE : 7-Oct-24
PREPARE BY	: DR RAKESH	TIME : 10:39:10 am

SR.NO.	MEDICINE NAME	QTY
1	ZOSTUM 3 GM INJ	2
2	OMEZ 40 MG INJ	2
3	DYNAPAR AQ INJ	3
4	CONTRAMOL 100	3
5	EMESET 4 ML INJ	3
6	ROCALTROL	10
7	SHELCAL 500 MG TAB	10
8	INJ, NS 100ML	8
9	DNS 500 ML NIRLIFE	4
10	DIS SYRINGE 10CC	3
11	D.NEEDLE 18.	3

A (P)

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Unique Hospital
multi-speciality & research institute

Run By : Surat Lifecare Pvt. Ltd

MEDICINE PRESCRIPTION

PT NAME : MANOJKUMAR KAILASHBABU
UPADHYAY **CODE :** 10909
DR. NAME : DR. FARIDA WADIA **IPD No :** I/1024/54
LOGIN NAME : DR. RONAK CHAUDHARI **ID :** 787
ROOM NO : SS-2008 **DATE :** 8-Oct-24
PREPARE BY : DR RAKESH **TIME :** 12:18:08 pm

SR.NO.	MEDICINE NAME	QTY
1	SHELICAL 500 MG TAB	10
2	ROCALTROL 0.25 CAP	10
3	ZOSTUM 3 GM INJ	2
4	OMEZ 40 MG INJ	2
5	DYNAPAR AQ	3
6	CONTRAMOL 100MG	3
7	NS 100 ML	8

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPE MACHINE)
Doctor : DR FARIDA WADIA

INVOICE

CREDIT MEMO

GST Tin: 24AARC8396M129

D.L.NO.20 SUR 105256/21 SUR 105257/GST:2

ORIGINAL PAID

Area: -

Bill No : C34778

08/10/2024 13:03

Detail :

Sr. Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Value	Taxable		SGST		CGST	
									Rate	Value	Rate	Value	Amount	
1 SHELICAL 500 MG TAB	OLV2L304	04/26	15	144.30	10	9.62	10.00	77.30	6.00	4.64	6.00	4.64	86.58	
2 ROCALTROL 0.25 CAP	RCA24002	01/26	10	343.67	10	34.37	10.00	276.16	6.00	16.57	6.00	16.57	309.30	
3 ZOSTUM 3 GM INJ	Z01BH24026	05/26	1	937.05	2	937.05	10.00	1505.97	6.00	90.36	6.00	90.36	1686.69	
4 OMEZ 40 MG INJ	P40013	11/26	1	52.50	2	52.50	10.00	84.38	6.00	5.06	6.00	5.06	94.50	
5 DYNATROY AQ 1 ML INJ	PA24025	02/26	1	39.60	3	39.60	10.00	95.46	6.00	5.73	6.00	5.73	106.92	
6 SUPRIDOL 2ML INJ	KP1568084	01/26	1	26.38	3	26.38	10.00	63.59	6.00	3.82	6.00	3.82	71.23	
7 NS 100 ML ECOFLEX	ZI241549	08/27	1	47.10	8	47.10	10.00	302.79	6.00	18.17	6.00	18.17	339.12	
						38		299.37	2405.66		144.34		144.34	2694.34
										OTHER +/-			0.00	
										ROUND OFF			-0.34	

You Save : Rs. 299.71

E. & O. E.

NET**2694.00**

Rupees Two Thousand Six Hundred Ninety Four Only

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

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Unique Hospital

multispeciality & research institute

Run By : Surat Lifecare Pvt. Ltd

MEDICINE PRESCRIPTION

PT NAME	: MANOJKUMAR KAILASHBABU UPADHYAY	CODE : 10909
DR. NAME	: DR. FARIDA WADIA	IPD No: I/1024/54
LOGIN NAME	: DR. RONAK CHAUDHARI	ID : 650
ROOM NO	: SS-2008	DATE : 7-Oct-24
PREPARE BY	: DR RONAK	TIME : 3:07:27 am

SR.NO.	MEDICINE NAME	QTY
1	LIOFEN 10 MG TAB	5

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
Customer : MANOKUMAR K UPADHYAY
Doctor : DR FARIDA WADIA

INVOICE

CASH ME

GST Tin: 24AABCS820CM170

DL NO. 22 SUB 10000001-51

ORIGINAL

Area:

Bill #100-20440

Bill No : C
Part II

You Save : Rs. 6.42

Rupees Fifty Six Only

Software by VISUAL INFOSOFT PVT. LTD. | Customer Care No: 070 2620 7000

E. & O. E.

NE

56.00



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Unique Hospital

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Run By : Surat Lifecare Pvt. Ltd

MEDICINE PRESCRIPTION

PT NAME : MANOJKUMAR KAILASHBABU
UPADHYAY **CODE :** 10909
DR. NAME : DR. FARIDA WADIA **IPD No:** I/1024/54
LOGIN NAME : DR. ASIFTA SHAIKH **ID :** 827
ROOM NO : SS-2008 **DATE :** 8-Oct-24
PREPARE BY : ANUKSHA **TIME :** 6:50:43 pm

SR.NO.	MEDICINE NAME	QTY
1	MAGNESIUM SULPHATE POWDER	4
2	GLYCERIN 100ML	1
3	BANDAGE 6"	2
4	GNR VENFLON 22	1
5	EASY FIX	1

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
 NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPEMACHINE)
Doctor : DR FARIDA WADIA

INVOICE

CREDIT MEMO

GST Tin: 24AARC8396M1Z9
 D.L.NO.20 SUR 105256/21 SUR 105257/GST:2

ORIGINAL

Area:-

Bill No : C34851 08/10/2024 18:56

Detail :

Sr. Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc% Value	Taxable Value	SGST		CGST		Amount
									Rate	Value	Rate	Value	
1 MAGNESIUM SULPHATE 20 GM POW	M029	01/27	1	40.00	4	40.00	10.00	122.03	9.00	10.98	9.00	10.98	144.00
2 GLYCERIN I.P.100GM	G100	05/27	1	75.00	1	75.00	10.00	57.20	9.00	5.15	9.00	5.15	67.50
3 COTTON BANDAGE 15 CM	1054	06/27	10	396.00	2	39.60	10.00	63.64	6.00	3.82	6.00	3.82	71.28
4 VENFLON NO 1 22 BD	4123386	04/29	1	311.50	1	311.50	10.00	250.31	6.00	15.02	6.00	15.02	280.35
5 CURAFIX IV CANTROL	2351212209	11/28	1	176.00	1	176.00	10.00	141.43	6.00	8.49	6.00	8.49	158.40

You Save : Rs. 79.70

9 80.17 634.62 43.45 43.45 721.53

OTHER +/-
ROUND OFF 0.00 0.47

E. & O. E. NET 722.00

Rupees Seven Hundred Twenty Two Only

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999



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Unique Hospital

multispeciality & research institute

Run By : Surat Lifecare Pvt. Ltd

MEDICINE PRESCRIPTION

PT NAME : MANOJKUMAR KAILASHBABU **CODE :** 10909
DR. NAME : DR. FARIDA WADIA
LOGIN NAME : DR. ASIFTA SHAIKH **IPD No:** I/1024/54
ROOM NO : SS-2008 **ID :** 837
PREPARE BY : DR. KAMLESH **DATE :** 8-Oct-24
SR.NO. **MEDICINE NAME** **QTY**
 1 INJ. EMSET 3

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
 NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
 Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPEMACHINE)
 Doctor : DR FARIDA WADIA

INVOICE

CREDIT MEMO/GST Tin: 24AARCG8396M1Z9

DENO 20 SUR 105256/21 SUR 105257/GST:

ORIGINAL

Area: -

Bill No: 034866

08/10/2024 20:37

Sr. Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	IGST Rate	IGST Value	CGST Rate	CGST Value	Amount
1 EMESET 4 ML INJ	4S60127	05/27	1	26.70	3	26.70	10.00	64.37	6.00	3.86	6.00	3.86	72.09
								3	8.01	64.37	3.86	3.86	72.09
You Save : Rs. 8.10													0.00
Rupees Seventy Two Only													-0.09

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

E. & O. E. **NET****72.00**

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Unique Hospital

Multi-specialty & research hospital

Run By : Surat Lifecare Pvt. Ltd

MEDICINE PRESCRIPTION

PT NAME : MANOJKUMAR KAILASHBABU UPADHYAY **CODE :** 10909
DR. NAME : DR. FARIDA WADIA **IPD No:** I/1024/54
LOGIN NAME : DR. KAMLESH MANUBHAI KALSARIYA **ID :** 867
ROOM NO : SS-2008 **DATE :** 9-Oct-24
PREPARE BY : DR KAMESH **TIME :** 10:17:09 am

SR.NO.	MEDICINE NAME	QTY
1	ZOCEF 500 TAB	20
2	ZERODOL S P TAB.	30
3	REBO DSR	20
4	ROCALTROL 0.25 CAP	60
5	SHELCAL 500 MG TAB	50

UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD. OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT
Customer : MANOJKUMAR K UPADHYAY (ICICI SWIPEMACHINE)
Doctor : DR FARIDA WADIA

INVOICE


 GST Tin: 24AARCS8396M1Z9
 D.L.NO.20 SUR 105256/21 SUR 105257/GST:2

Area: -

Bill No : C34924

09/10/2024 10:45

Detail :

Sr. Description	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Taxable Value	SGST		CGST		Amount
								Disc%	Value	Rate	Value	
1 HYTOS 500 TAB	CT240245	01/26	10	576.00	20	57.60	10.00	925.71	6.00	55.54	6.00	1036.80
2 ZERODOL-SP TAB	FND054034A	09/26	10	130.10	30	13.01	10.00	313.63	6.00	18.82	6.00	351.27
3 RABPOD DSR TAB	C23K014A	10/25	10	87.00	20	8.70	10.00	139.82	6.00	8.39	6.00	156.60
4 ROCALTROL 0.25 CAP	RCA24002	01/26	10	343.67	20	34.37	10.00	552.33	6.00	33.14	6.00	648.61
5 SHELCAL 500 MG TAB	OLV2L304	04/26	15	144.30	50	9.62	10.00	386.52	6.00	23.19	6.00	432.90

You Save : Rs. 288.64

140	288.46	2318.01	139.08	139.08	2596.18
OTHER +/-			0.00		-0.18
ROUND OFF					

Rupees Two Thousand Five Hundred Ninety Six Only

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

E. & O. E.

NET 2596.00



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UNIQUE PHARMACY

R/B SURAT LIFECARE PVT LTD, OPP KIRAN MOTOR,
NEAR CANAL,CIVIL HOSPITAL CHAR RASTA-SOSYO CIRCLE,SURAT

Customer : MANOJKUMAR K UPADHYAY
Doctor : DR FARIDA WADIA

Sr. Description

- 1 DNS 500 ML NIRLIFE
- 2 EXAMINATION GLOVES M
- 3 NS 100 ML ECOFLEX
- 4 COTTON BANDAGE 15 CM
- 5 SYRINGE 10 ML BD
- 6 NEEDLE NO 18 1
- 7 NEEDLE NO 18 1 1/5
- 8 DEXONA 2 ML INJ
- 9 DYNATROY AQ 1 ML INJ
- 10 METOLAR 5 ML INJ

	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	SGST		CGST		Amount
									Rate	Value	Rate	Value	
	1E242455	04/27	1	42.80	1	42.80	10.00	34.39	6.00	2.06	6.00	2.06	38.52
	SHLEG022	06/26	1	250.00	1	250.00	10.00	200.89	6.00	12.05	6.00	12.05	225.00
	2C240480	02/27	1	47.10	4	47.10	10.00	151.39	6.00	9.08	6.00	9.08	169.56
	1054	06/27	10	396.00	1	39.60	10.00	31.82	6.00	1.91	6.00	1.91	35.64
	24G30MB201	06/29	1	28.60	2	28.60	10.00	45.96	6.00	2.76	6.00	2.76	51.48
	24462R	05/29	1	3.00	3	3.00	10.00	8.04	6.00	0.48	6.00	0.48	9.00
	4096264	03/29	1	6.50	4	6.50	10.00	20.89	6.00	1.25	6.00	1.25	23.40
	N400900	12/25	1	11.40	1	11.40	10.00	9.16	6.00	0.55	6.00	0.55	10.26
	PA24025	02/26	1	39.60	2	39.60	10.00	63.64	6.00	3.82	6.00	3.82	71.28
	4L60081	03/27	1	19.04	1	19.04	10.00	15.30	6.00	0.92	6.00	0.92	17.14
					20			71.38	581.48	34.89	34.89	34.89	651.28
													0.00
													-0.28

Rupees Six Hundred Fifty One Only

Software by VISUAL INFOSOFT PVT. LTD. : Customer Care No: 079 3520 7999

E. & O.E. **NET** 651.00

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Unique Hospital
multispeciality & research institute

Run By : Surat Lifecare Pvt. Ltd

Nr. Kiran Motors, Opp. Unique B.R.T.S Junction, Civil Hospital Char Rasta - Sosyo Circle Lane, Off Ring Road, Surat.
Tel.: 0261 6776666/00 | Web : www.uniquehospital.in | E-mail : uniquehospitalsurat@yahoo.com

INPATIENT BILL CUM RECEIPT

Rec No : GEN2425/1992 Date : 09-Oct-2024

Bill No : GEN2425/2128 Date : 09-Oct-2024

UHID : 10909 IPD No : I/1024/54

Patient Name : **MANOJKUMAR KAILASHBABU
UPADHYAY**

Age / Sex : 55 Yrs./M

Address : B-1202 ,BELLA CASSA SOC , BHIMRAD CANAL ROAD,,SURAT

D.O.A. / Time : 04-Oct-2024 / 1:41 PM

D.O.D / Time : 09-Oct-2024 / 10:24 AM

Doctor Name : **DR. FARIDA WADIA**

Room Type : Semi Special

PARTICULARS

			AMOUNT
Registration Charges	₹ 0		400
Room Charges	₹ 11500		11500
Operation Charges	₹ 185750		185750
Visiting Charge	₹ 8100		8100
Additional Charge	₹ 840		840
Miscellaneous Charges	₹ 725		725
Laboratory	₹ 4928		4928
Nursing Care Service Charges (10.00 %)	₹ 21224		21224
Final Bill Amount			233467
Deposit			233467

EntryBy:Mihir Prajapati, PCName:BILLING1, At:09-Oct-2024 12:28:42 PM.

The FINAL BILL AMOUNT is Rs. 233467.00

Rupees Two Lac Thirty-three Thousand Four Hundred Sixty-seven Only.

Subject to SURAT Jurisdiction

Payment by cheque Subject To Realization



Amount	Type	Remark	User

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Unique Hospital

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Run By : Surat Lifecare Pvt. Ltd

Nr. Kiran Motors, Opp. Unique B.R.T.S Junction, Civil Hospital Char Rasta - Sosyo Circle Lane, Off Ring Road, Surat.
Tel.: 0261 6776666/00 | Web : www.uniquehospital.in | E-mail : uniquehospitalsurat@yahoo.com

INPATIENT BILL CUM RECEIPT DETAILS

Patient : MANOJKUMAR KAILASHBABU UPADHYAY

IPD No : I/1024/54

Room Detail :

No.	Date	Room	Net Room Amount
1	4-Oct-24	Semi Special	2300
2	5-Oct-24	Semi Special	2300
3	6-Oct-24	Semi Special	2300
4	7-Oct-24	Semi Special	2300
5	8-Oct-24	Semi Special	2300
			11500

Dr. Operation Charges :

No.	Date	Dr. Name	Charge Type	Remark	Amount
1	5-Oct-24	Dr. Farida Wadia	Dr. Charges	E N T Surgery Group Q	66300
2	5-Oct-24	Ot	OT Charges	E N T Surgery Group Q	62156
3	5-Oct-24	Dr. Harish Suthar	Anesthesia Charges	E N T Surgery Group Q	20719
4	9-Oct-24	Dr. Alok Karulkar	Asst. DrCharges	E N T Surgery Group Q	36575
					Total Amount : 185750 ✓

Visiting Charge :

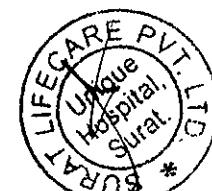
No.	Dr. Name	Detail	Amount
1	Dr. Pradip Dalwadi	-	1800
2	Dr. Samir Gami	-	6300
		Total Amount :	8100 ✓

Additional Charge

No.	Date	Description	Rate	Qty	Amount
1	9-Oct-24	Glucometer Charge	120	2	240
2	9-Oct-24	Oxygen Charge	200	3	600
		Total Amount :	840 ✓		

Miscellaneous Charges

No.	Date	Description	Rate	Qty	Amount
1	9-Oct-24	Inj. Fantanil (2ml)	75	1	75
2	9-Oct-24	Sevofluren (10ml)	650	1	650
		Total Amount :	725		



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Unique Hospital
multispeciality & research institute

Run By : Surat Lifecare Pvt. Ltd

Nr. Kiran Motors, Opp. Unique B.R.T.S Junction, Civil Hospital Char Rasta - Sosyo Circle Lane, Off Ring Road, Surat.
Tel.: 0261 6776666/00 | Web : www.uniquehospital.in | E-mail : uniquehospitalsurat@yahoo.com

INPATIENT BILL CUM RECEIPT DETAILS

Patient : MANOJKUMAR KAILASHBABU UPADHYAY

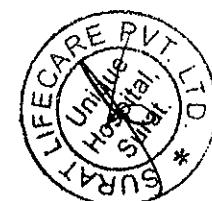
IPD No : I/1024/54

Laboratory :

No.	Date	Test Name	Amount
1	5-Oct-24	S.Calcium	297
2	6-Oct-24	S.Calcium	297
3	6-Oct-24	S.Calcium	297
4	7-Oct-24	CBC & MP	385
5	7-Oct-24	S.Creatinine	275
6	7-Oct-24	Electrolytes	616
7	7-Oct-24	S.Calcium	297
8	7-Oct-24	S.Calcium	297
9	8-Oct-24	S.Calcium	297
10	8-Oct-24	S.Calcium	297
11	9-Oct-24	CBC & MP	385
12	9-Oct-24	S.Creatinine	275
13	9-Oct-24	Electrolytes	616
14	9-Oct-24	S.Calcium	297
Total Amount :			4928

Deposit Detail :

No.	Date	Deposit Rec. No	Taken By	Payment Type	Amount
1	4-Oct-24	25/5151	Asha Zinzala	Cash	10000
2	4-Oct-24	25/5156	Mihir Prajapati	Cash	100000
3	4-Oct-24	25/5157	Mihir Prajapati	Debit/Credit Card	100000
4	5-Oct-24	25/5180	Asha Zinzala	Debit/Credit Card	100000
5	9-Oct-24	25/5292	Mihir Prajapati	CMS	-76533
Total Amount :				233467	



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Pratham Endocrine & Diabetes Centre

UG-1 & 2, Milestone-Canal Point, beside INS Hospital, Nr. Kharvarnagar BRTS canal Rd., Khatodra Wadi, Surat, Gujarat, India
PIN: 395002 | CONTACT NO: 7572804770

Dr. Pradip Dalwadi
DM (Endocrinologist)

B (11)

OPD RECEIPT				
PATIENT NAME:	MR. MANOJ KUMAR UPADHYAY	RECEIPT NO:	P28980	
AGE/GENDER:	55 YEARS / M	RECEIPT DATE:	29 OCTOBER 2024	
UHID:	P33478			
IN ACC. OF:	DR.PRADIP DALWADI			
ADDRESS:	BHIMRAD, SURAT, GUJARAT, INDIA			

Received with thanks, amount of ₹ 700.00 towards the following:

INVOICE: P32857

NO.	PARTICULARS	UNIT	RATE	AMOUNT
1	Follow-up Appointment - Dr. Pradip Dalwadi	1.00	700.00	700.00
	TOTAL(₹)		700.00	700.00
BILLED AMOUNT (₹)				700.00
TOTAL PAYABLE AMOUNT(₹)				700.00
PAID AMOUNT(₹)				700.00

PAYMENT METHOD: CASH

(₹)SEVEN HUNDRED ONLY

For, Pratham Endocrine & Diabetes Centre

AUTHORIZED SIGNATORY



AYANSH PHARMACY & PHARMACEUTICAL UG-1,UG-2,MILESTONE CANAL,POINT,NR.INS HOSPITAL,BF KMA TODARA , SURAT Ph.. .8469069062				Transaction: Cash Bill # INV/16382 Date: 11/10/2024 			Doctor: PRADIP DALWADI A 20 51 Patient: MR MANOJ KUMAR UPADHYAY SURAT				
Sr.	Description	Hsn	Pack	Mfg.	MRP	Batch	Exp.	Qty.	GST %	GST Amt	Amount
1	ROCALTROL 0.25 CAP @	300450	10 CAP	NIC	312.43	RCA23006	01/26	2	12.00	53.56	624.86
											
											
GET WELL SOON				Consult Doctor Before use of Medicines.				Sub Total : 624.86 SGST 26.78 CGST 26.78 Rounding Off 0.12			
BROKEN STRIP ARE NOT ACCEPTED											
MEDICINES WILL NOT BE RETUEN WITHOUT BILL.											
E. & O.E.	Heenaben Pawar				<u>YOU SAVED</u>	124.86	Grand Total : 500.00				
SUBJECT TO SURAT JURISDICTION				11/10/2024 18:39:54				For, AYANSH PHARMACY & PHARMACEUTICAL			



MANOJ KUMAR UPADHYAY (55Y / M)

29 October 2024 10:31 AM

(P33478) | +91 7490010078

VITAL SIGNS:

BP:- 120/78 SITTING HR:- 74/MIN W:- 82.6 KG

INVESTIGATION

[28-10-24] SERUM CALCIUM: 10.0 FBS: 84 T3: 92.9 T4: 7.1 TSH: 1.6852 TOTAL CHOLESTEROL: 299 HDL: 40 TG: 246 LDL: 209 HB: 13.9

DIAGNOSIS

- SOLITARY THYROID NODULE IN LEFT LOBE (53 X 41 X 53 MM - TR3)
- FNAC - BETHESDA CATEGORY IV (FOLLICULAR NEOPLASM)
- POST OP SUBTOTAL THYROIDECTOMY (2024)
- POST OP HYPOPARATHYROIDISM (TRANSIENT)
- POST OP SUBCLINICAL HYPOTHYROIDISM

Rx

No	Name	Dose	Details	Quantity
1	TAB.THYRONORM 75MCG THYROXINE SODIUM 75MCG	1 - 0 - 0	दररोज - 70 टिक्की	70
2	CAP.ROCALTROL 0.25MCG Calcitriol 0.25 MCG	1 - 0 - 1	दररोज - 70 टिक्की	140
3	TAB.SHELCAL 500MG CALCIUM CARBONATE 500MG + CHOLECALCIFEROL 250IU	1 - 0 - 1	दररोज - 70 टिक्की	140

TEST REQUESTED

- T3 - T4 - TSH
- CALCIUM
- LIPID PROFILE - FASTING

Follow up: દ્રોષી ભતાવચા માટે તારીખ 1 જાન્યુઆરી 2025, બુધવાર ના રોજ આવનું.

Prepared By

Dr. DIVYA PANDAV

Dr. Pradip Dalwadi (Endocrinologist)

Dr. Pradip P. DALWADI
 M
 Consultant Endocrinologist
 Reg. No. G-39513

Page | 1

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Bharat Medical					Invoice				Cash Memo		GST Tin: ABCDEFGHIJKLMNOP DL.NO.20-GJ-SUR-228435, 21-GJ-SUR-22843						
Shop No.B-3, EAST POINT, ALTHAN-BHIMRAD CANAL ROAD, BHIMRAD,SURAT-395007,MO. - 8128013454 ,7990724693					Original												
Customer : CASH					Area : - GST Tin: CA				Bill No: C8459 15/10/2024 Detail :								
Sr.	Description	HSN	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	Gst %	Gross Amount	Amount				
1	THYRONORM 75 TAB	30049	TMF24091	08/25	1	192.88	1	192.88	20.00	137.77	12.00	192.88	154.30				
Bharat Medical Shop No. 3, Aakash East Point, Canal Road, Bhimrad, Surat - 395007, Mo. 8128013454																	
You Save : Rs. 38.88							1			38.58	137.77	16.53	192.88	154.30			
SUBJECT TO SURAT JURISDICRION, E.&O.E.								GST%	GST Base	SGST	CGST	IGST	OTHER +/-	0.00			
GOODS SOLD ONCE WILL NOT TAKEN BACK.								12.00	137.77	8.27	8.27	0.00	ROUND OFF	-0.30			
Rupees One Hundred Fifty Four Only								E. & O. E.	Authorised Sign	NET		154.00					

A 21

48

Bharat Medical				Invoice				Cash Memo			GST Tin: ABCDEFGHIJKLMNOP DL.NO.20-GJ-SUR-228435, 21-GJ-SUR-22843				
											Bill No : C8936		24/10/2024 19:06		
Customer : MANOJ KUMAR UPADHYAY	Area: BHIMRAD										Detail :				
Doctor : DR.PRADEEP DALWADI	Sr.	Description	HSNCode	BatchNo	ExpDt	Unit	M.R.P.	Qty	/ Unit	Sale Rate	Disc%	Taxable Value	SGST	CGST	Amount
1 ROCALTROL 0.25 CAP	1	30045036	RCA23006	01/26	1	312.43	1	312.43	20.00	223.16	6.00	13.39	6.00	13.39	249.94
You Save : Rs. 62.43															
PLEASE CONSULT YOUR DOCTOR BEFORE USING THE PRESCRIBED MEDICINES															
SUBJECT TO SURAT JURISDICTION, E & O.E. SIGN:															
Rupees Two Hundred Fifty Only															
Corporate by VISUAL INFOSOFT PVT. LTD. Customer Care No: 079 3520 7999															
Bharat Medical Shop No.3, Aakash East Point, Canal Road, Bhimrad, Surat - 395007, Mo. 8128013454												223.16	13.39	13.39	249.94
E. & O. E.												OTHER +/-	0.00	ROUND OFF	0.06
NET												250.00			

47

BHARAT MEDICALSHOP NO.B-3, EAST POINT, ALTHAN-BHIMRAD CANAL ROAD,
BHIMRAD,SURAT-395007,MO. - 8128013454 ,7990724693**INVOICE**CASH MEMO GST Tin: ABCDEF GHIJKLMNOP
DL.NO.20-GJ-SUR-228435, 21-GJ-SUR-228436

ORIGINAL

Area: BHIMRAD

Bill No : C9081

27/10/2024 18:19

Detail :

Customer : MANOJ KUMAR UPADHYAY
Doctor : DR.PRADEEP DALWADI

Sr. Description	HSNCode	BatchNo	ExpDt	Unit	M.R.P.	Qty	Sale Rate / Unit	Disc%	Taxable Value	SGST		CGST		Amount
										Rate	Value	Rate	Value	
1. SHELCAL 500 TAB	30045039	OLV2L266	03/26	1	144.30	1	144.30	20.00	103.07	6.00	6.18	6.00	6.18	115.44

You Save : Rs. 29.30

PLEASE CONSULT YOUR DOCTOR BEFORE USING THE PRESCRIBED MEDICINES.
SUBJECT TO SURAT JURISDICRION, E.&O.E. SIGN:

Rupees One Hundred Fifteen Only

Software by VISHNU INFOSOFT PVT. LTD. Customer Care No: 079 3520 7999

1	28.86	103.07	6.18	6.18	115.44
			OTHER +/-		0.00
			ROUND OFF		-0.44

E. & O. E. **NET** **115.00**

A 23 ✓

46

**Kiran Multi Super Speciality Hospital**

Nr Sumul Dairy, Surat - 395004

Tel : 0261-7161111 Fax:

E-mail : info@kiranhospital.com Website:
www.kiranhospital.com**Cash Bill OP**

Bill No : OPCA25/341442
 Bill Date Time : 23/09/2024 12:28 PM
 Lab No :

B1

UHID : 245596 Payer : Cash
 Patient Name : Mr. Manojkumar Kailashbabu Upadhyay Gender/Age : Male/56 Yr
 Contact No : 7490010078 Presc. Doctor : Dr. YASH LAVANA
 Address : E-504, TIRUPATI SHYAM VILLA, BHIMRAD CANAL ROAD, SURAT, Gujarat, INDIA, - 395007

Sponsor : Cash
 Referred By : Self
 Department : ENT UNIT A

No.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	Consultation Charge (Dr. YASH LAVANA)	800.00	1.00	800.00	650.00	150.00	150.00	0.00
				Gross Amount				800.00
				Contribution by Kiran Hospital				650.00
				Net Amount				150.00
				Payer Amount				0.00
				Patient Amount				150.00
				Amt Received (Rs.)				150.00

Cash: 150.00

Amount Received in words (Rs.) One Hundred Fifty Only.

Narration :

Authorised Signatory

✓

B

3

**Kiran Multi Super Speciality Hospital**

Nr Sumul Dairy, Surat - 395004

Tel : 0261-7161111 Fax:

E-mail : info@kiranhospital.com Website:
www.kiranhospital.com**Cash Bill OP**

Bill No : OPCA25/340890
 Bill Date Time : 23/09/2024 11:26 AM
 Lab No :

UHID : 245596 Payer : Cash
 Patient Name : Mr. Manojkumar Kailashbabu Upadhyay Gender/Age : Male/56 Yr
 Contact No : 7490010078 Presc. Doctor : Dr. HARDIP MANIAR
 Address : E-504, TIRUPATI SHYAM VILLA, BHIMRAD CANAL ROAD, SURAT, Gujarat, INDIA, - 395007

Cash Bill OP

Bill No : OPCA25/340890
 Bill Date Time : 23/09/2024 11:26 AM
 Lab No :

No.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	Follow Up Consultation Charge - Super Specialist (Dr. HARDIP MANIAR)	1000.00	1.00	1000.00	850.00	150.00	150.00	0.00
				Gross Amount				1000.00
				Contribution by Kiran Hospital				850.00
				Net Amount				150.00
				Payer Amount				0.00
				Patient Amount				150.00
				Amt Received (Rs.)				150.00

By Cash: 150.00

Amount Received in words (Rs.) One Hundred Fifty Only.

Narration :

Authorised Signatory

✓

પ્રેરણાલોગના રીપોર્ટ માટે સેમ્પલ કલેક્શનની સુખીધા ઘરે બેઠા ઉપલબ્ધ છે સપ્ક નંબર: ૮૭૨૯૪૩૨૧૧૧
 તથા રીપોર્ટ જોવા માટે ડિરાઇવિંગ ના એશન્ડ પીર્ટિલ reports.Kiranhospital.com ની મુલાકાત દો



A Step towards Healthy Community

KIRAN HOSPITAL

MULTI SUPER SPECIALITY HOSPITAL & RESEARCH CENTER



H-2020-0727

National Health Authority

NAME: Mahesh Kumar
Upadhyay
UHID: 245596

DATE: 23/3/24

SURGERY:

ALLERGY:

Patient referred for
met my findings.

O/E: BM 10

AW

OET Neck

NOSE: NTR

TE
T

OP (NTR)

FNAC from

NTH palpable ①

(P) thyroid

Thyroid gland

swelling

TO scrotales

BVC ① Enlarged



H.R.T. noted
Lung

સોમ/સોન, બુધ/બૃદ્ધ, શુક્ર/શુક્ર

Dr. YASH LAVANA
MBBS, MS(ENT), FHO(GCRI)
Reg No.: G- 26685
Kiran Multi Super Speciality Hospital
& Research Center Surat

FOLLOW UP DATE:



Letter Head meant only for OPD / IPD Patient Records or Investigation Reports.

Nr. Sumil Dairy, Surat - 395 004

Ph.: 0261-7161111 | E-mail: inquiry@kiranhospital.com | www.kiranhospital.com

44

<input checked="" type="checkbox"/> PRE OP MAJOR	<input checked="" type="checkbox"/> S. CREAT +2	<input checked="" type="checkbox"/> S. PTH
CAG PROFILE		

ADM

S.CREAT

one osmotic fluid
opinion free
for further M

S.PTH

TFT

FBS/PP2 BS

HBA1C

BT/CT

PT INR

ECG (CLUSTER-E)

 2D ECHO (CLUSTER-E)

CXR (RADIOLOGY)

X-RAY B/L MASTOID SCHULLER'S VIEW
(RADIOLOGY)X-RAY LATERAL SKULL FOR
NASOPHYRNX (RADIOLOGY)

USG- NECK (RADIOLOGY)

BARIUM SWALLOW (RADIOLOGY)

CECT NECK (RADIOLOGY)

NCCT PNS (RADIOLOGY)

HRCT TEMPORAE BONE (RADIOLOGY)

FNAC (SECOND FLOOR)

 PHYSICIAN (CLUSTER-C) PAC (CLUSTER-C)

PEDIATRIC (CLUSTER-D)

On (P) May facial swelling

(P) hemi facial edema
+

Frozen Facial

JRA



A Step towards Healthy Community

KIRAN HOSPITAL

MULTI SPECIALITY HOSPITAL & RESEARCH CENTRE



H-2020-0727

National Health Authority

DR.HARDIP MANIAR

M.D.;MRCP-UK (SCE);EBDRM(EUROPE) IDCCM(HINDUJA MUMBAI)

CONSULTANT PULMONOLOGIST,
CRITICAL CARE AND SLEEP MEDICINE.

NAME:- Manoj Kumar Upadhyay

AGE:-

K/C/O

C/O

UHID:- 245596

DATE:- 4/11/2024

PR - 92 min^o
 SpO₂ - 98%
 BP - 118 / 78 mmHg
 T. - 97.7 °F
 Wt. 61.5 kg

Investigation

FOLLOW UP :-

CLINICAL IMPRESSION :-

DR. HARDIP MANIAR(M.D.)

Letter Head meant only for OPD / IPD **47** Client Records or Investigation Reports.
 No. Sumai Dairy, Surat, Gujarat - 395 004,

File No. HQ-HROCMER(PFIL)/221/2021-HR-CMER (Computer No. 1162) E-mail : inquiry@kiranhospital.com | www.kiranhospital.com
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H-2020-0727



National Health Authority

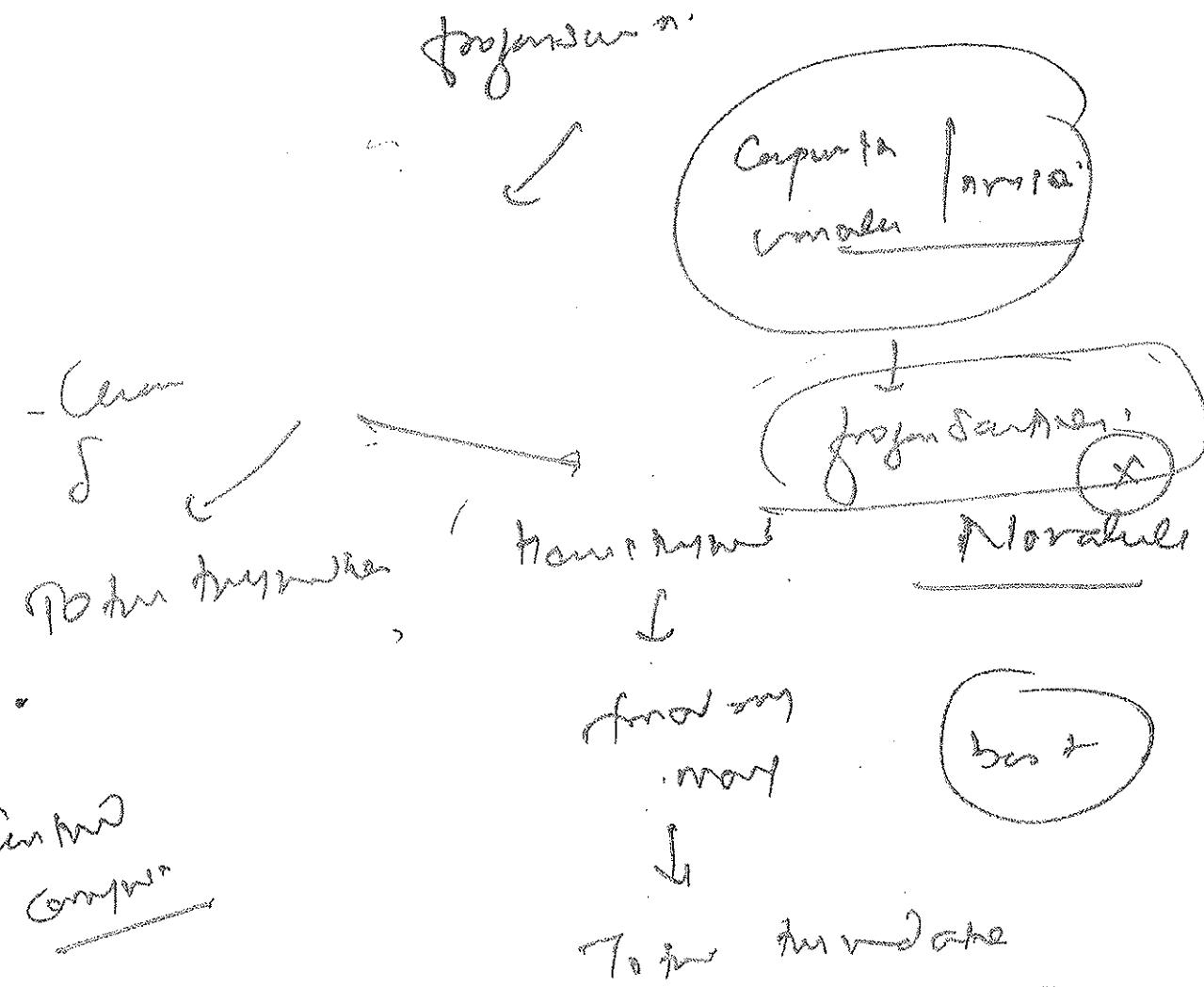
(42)

DEPARTMENT OF SURGICAL ONCOLOGY

UHID: 245596

DATE: 30/1/2024

NAME: Mr. Monos Kumar Upadhyay



FOLLOW UP: / /

DR. SHAMSUDDIN J VIRANI

MS, DNB – Surgical Oncology
 Senior Consultant & Head-Surgical
 Oncology
 Reg No.: G-36181

DR. SAVAN CHOVATIA

MDS, FHNO-Head & Neck Oncology
 Consultant-Head & Neck Oncology
 Reg No.: A-10559

Letter Head meant only for OPD / IPD Patient Records or Investigation Reports.

Nr. Sumul Dairy, Surat, 484004.

Ph.: 0261-7161111 | E-mail : inquiry@kiranhospital.com | www.kiranhospital.com

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Pratham Endocrine & Diabetes Centre

UG-1 & 2, Milestone-Canal Point, beside INS Hospital, Nr. Kharvarnagar BRTS canal
 Rd., Khatodra Wadi, Surat, Gujarat, India
 PIN: 395002 | CONTACT NO: 7572804770

Dr. Pradip Dalwadi
 DM (Endocrinologist)

(41)

OPD RECEIPT			
PATIENT NAME:	MR. MANOJ KUMAR UPADHYAY	RECEIPT NO:	P25356
AGE/GENDER:	55 YEARS / M	RECEIPT DATE:	26 SEPTEMBER 2024
UHID:	P33478		
IN ACC. OF:	DR.PRADIP DALWADI		
ADDRESS:	BHIMRAD, SURAT, GUJARAT, INDIA		

Received with thanks, amount of ₹ 1,500.00 towards the following:

INVOICE: P29441

NO.	PARTICULARS	UNIT	RATE	AMOUNT
1	First Consultation - Dr. Pradip Dalwadi	1	1,500.00	1,500.00
	TOTAL(₹)		1,500.00	1,500.00

BILLED AMOUNT (₹)	1,500.00
TOTAL PAYABLE AMOUNT(₹)	1,500.00
PAID AMOUNT(₹)	1,500.00

PAYMENT METHOD: CASH

(₹)ONE THOUSAND FIVE HUNDRED ONLY

For, Pratham Endocrine & Diabetes Centre

AUTHORIZED SIGNATORY





Pratham

Endocrine & Diabetes Centre

40

Dr. Pradip P. Dalwadi,
MD, DM (Endocrinologist)
Consultant Adult & Pediatric Endocrinologist
Gold Medalist (Mumbai)
Reg. No. G-39513

CENTRE OF EXCELLENCE IN DIABETES & ENDOCRINOLOGY

Manoj Kumar Upadhyay (55Y / M)

26 September 2024 03:20 PM

(P33478) | +91 7490010078

COMPLAINS/SYMPOTOMS

- SWELLING OVER NECK

MAIN CONCERN

- THYROID NODULE

COMMENT:- F/H/O = DM & THYROID DYSFUNCTION - FATHER.

26-9-24

USG NECK :-

NODULE 1 : LEFT LOBE - 53 X 41 X 53 MM - SOLID - HYPERCHOIC - TR3 (MILDLY SUSPICIOUS)

23-9-24

CT NECK :-

ENLARGE LEFT LOBE OF THYROID GLAND WITH 6 CM HETEROGENOUS NODULE - BENIGN IN NATURE (SIZE : 45 X 51 X 60 MM)

VITAL SIGNS:

BP:- 126/82 SITTING HR:- 84/MIN W:- 80.7 KG

INVESTIGATION

[23-09-24] T3: 1.94 T4: 77.7 TSH: 2.609

[21-09-24] HB: 14.6

[20-01-24] PUS CELLS: 1 SGPT (AST): 22 SERUM CREATININE: 0.97 EGFR - CREATININE CLEARANCE(MIN/1.73M2): 92 RBS: 90

DIAGNOSIS

- SOLITARY THYROID NODULE IN LEFT LOBE (53 X 41 X 53 MM - TR3)
- EUTHYROID STATUS AT PRESENT

TEST REQUESTED

- USG GUIDED FNAC OF SOLID COMPONENT OF LEFT THYROID NODULE

Prepared By
Dr. Gayatri Mandvekar

Flup

Dr. Pradip Dalwadi (Endocrinologist)

DR. PRADIP P. DALWADI
MD(Medicine); DM(Endocrinology)
Consultant Endocrinologist
Reg. No. G-39513

Page | 1

UG-1 & UG-2, Milestone Canal Point, Nr. IHS Hospital, BRTS Canal Road, Khatodara, Surat-395002.

SUNSHINE GLOBAL HOSPITAL
 ADDRESS: BESIDERELIANCE SMART BAZAR,
 DUMAS-PIPLOD ROAD, SURAT – 395007
 CONTACT TEL: 0261 4111000
 EMAIL: INFO@SUNSHINEGLOBALHOSPITALS.COM
 EMERGENCY HELPLINE: +91 7574849465



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WWW.SUNSHINEGLOBALHOSPITALS.COM
 APPOINTMENT BOOKING NO: 6357565614

B(4)

OPD Registration And Billing

UMR #	: SHS0005058	Receipt No	MSREC24014329		
Patient Name	Mr. MANOJKUMAR UPADHYAY			Age/Sex	: 56Y(s)/Male
Patient Type	CASH			Group Bill No	: GBMS0008880
Ref By	WALKIN			Bill Date	: 01-Oct-2024 16:05
Consultant	Dr.FARIDA WADIA			Phone No	: 7490010078
S No	Test Code	Service Name	Bill No	Qty	Rate
1		Registration	SGB24005058	1	150.00
2	DM0250	Dr.FARIDA WADIA - FIRST VISIT - CONSULTATION	SOC24002638	1	1,200.00
					Total Amount : 1,350.00
					Net Amount : 1,350.00
					Receipt Amount : 1,350.00
					Cash Amount : 1,350.00

Remarks :



SHS0005058

SGB24005058

Created By : chandanpatel

Create Date : 01-Oct-2024 16:05

Print By : CHANDANPATEL

Print Date : 01-Oct-2024 16:05

✓

GST NO: 24AADCB2295A1Z7
 MSME: UDYAM-GJ-24-000404
 U85110GJ2007PTC051728

PAN: AADCB2295A
 CIN:



Unique Hospital

38

Run By : Surat Lifecare Pvt. Ltd

Nr. Kiran Motors, Opp. Unique B.R.T.S Junction, Civil Hospital Char Rasta - Sosyo Circle Lane, Off Ring Road, Surat.
Tel.: 0261 6776666/00 | Web : www.uniquehospital.in | E-mail : uniquehospitalsurat@yahoo.com

INVOICE

UHID : 10909

Invoice No. : LAB2425/7767

Name : MANOJKUMAR - UPADHYAY

Treating Dr : Dr. FARIDA WADIA (--)

Date : 01-Oct-2024

Sr. No.	Details	Rate
1	CBC / ESR	400
2	Urine Routine	140
3	PROTHROMBIN TIME PT/ INR (PT)	280
4	APTT	320
5	AUSTRALIA ANTIGEN RAPID (HBsAg)	460
6	SGPT	250
7	HIV (1+2) AB RAPID	580
8	S. VITAMIN - D3	1470
9	S.vitamin B-12	840
10	GLYCOSYLATED HEMOGLOBIN [HbA1C]	550

Rec.Date	Receipt No	Amt.	Payment Type	User
1-Oct-24	619	5290	Cash	EntryBy:Rajeshree D Patel, PCName:RECEPTION1, At:01-Oct-2024 06:31:08 PM.
		<u>5290</u>		

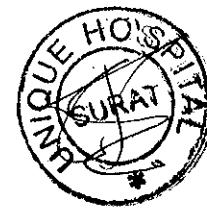
Total : 5290
Received : **5290**

Due : 0

Subject to SURAT Jurisdiction

Payment by cheque Subject To Realization

EntryBy:Laboratory, PCName:LAB, At:01-Oct-2024 06:27:54 PM.



✓



11/10/2024

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(B-7)

→ Has Acute ~~Bronchitis~~ on 4/10/2024
~~Bronchitis~~

Get investigated for sputum & formal.
 That he had St. Shyed Laxmi company
 Friction at 2nd & 3rd rib
 Also displays the oesophagus
Extension of the sternum from left
can feel lower back on right

On Hopkins BVC INR

Plan
 Can do Hemithyroid & Isthmectomy
 Wait for formal biopsy report Dr. Farida Wadia
 (S.P. ENT Surgeon)
 98246 13828
Thyroid amorphous Thyroid
 SUNSHINE GLOBAL HOSPITAL
 SURAT.

Surat: Piplod

Besides Big Bazar, Gaurav Path,
 Dumas Road, Surat - 395007.
 T : +91 0261 4111000
 F : +91 0261 4111001

Sunshine Global Hospital, Manjalpur, Vadodara in NABH Accredited

Toll Free No - 1800 170 6666

info@sunshineglobalhospitals.com www.sunshineglobalhospitals.com

Vadodara : Manjalpur

Nr. Shreyas Vidhyalaya, Nalin House,
 Manjalpur, Vadodara - 390 011, INDIA
 T : +91 265 3300400, 2633200, 2632044
 F : +91 265 2632400

53

Bharuch:

Adarsh Market, Panch batti,
 Station Road, Bharuch - 392 001.
 T : +91 2642 265800
 F : +91 2642 267800

(36)

But entrap will send with needle
 for frozen specimen & if it
 shows metastasis will proceed
 for Sest Shigweebing at that
 time only.

Dear Dr Deepshikha Dabwadi
 kindly review these
 patient pre op and obx.

Tentative date for surgery - 5-10-2022
 Thank you
 Faizal bbad

Dear Dr Samir Game
 kindly give needed films
 ECG & X-ray chart for

Shigweebing
 Thank you

for
 Faizal bbad

5-10-2022 54



11/10/24

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(35)

SurgeryUniqueHES

① Homithyoid
+
Isthmectomy
Substef
(sos) neck
dissection.

Group

G.
+

Group

G.

DOA = 41 10/24

DOS - 51 10/24

Dr. Farila Wadia
(ENT Surgeon)
M.S.O.I. No. 7328
Reg. No. 1000000000000000000
SUNSHINE GLOBAL HOSPITAL
Piplod, SURAT.

Surat: Piplod

Besides Big Bazar, Gaurav Path,
Dumas Road, Surat - 395007.
T : +91 0261 4111000
F : +91 0261 4111001

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Vadodara : Manjalpur

Nr. Shreyas Vidhyalaya, Nalini House,
Manjalpur, Vadodara - 390 011, INDIA
T : +91 265 3300400, 2633200, 2632044
F : +91 265 2632400

Bharuch:

Adarsh Market, Panch batti,
Station Road, Bharuch - 392 001.
T : +91 2642 265800
F : +91 2642 267800

(34) Mr. Manoj Kumar Upadhyay

01110124



SHS0005058

56/M

Father Has Hypothyroidism

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→ Referred by Dr. D Udayam Sharma.
on 25/9/24 for (L) Thyroid Nodule.

→ At Present patient Having NO Complaint.

USA week : Large nodular lesion
arising from the almost
Synergy (26/9/24) (L) lobe of thyroid gland.

[TIRADS - Cat 3
(Gently Suspicious)
FNAC Correlation suggested

FNAC
(28/9/24) ⇒ Follicular Neoplasm.
Ician Hos.
(L) lobe of Thyroid swelling.

CT week (23/9/24) Ician Hos

Enlarged (L) lobe of Thyroid is large.
Heterogenous Nodule (45 x 51 x 60 mm)
(P-T-O)

Dr. Farida Wadia
M.S., D.L.O (ENT Surgeon)

Surat: Piprol

Besides Big Bazar, Gaurav Path,
Dumas Road, Surat - 395007.
T : +91 0261 4111000
F : +91 0261 4111001

Sunshine Global Hospital, Manjalpur, Vadodara is NABH Accredited
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Vadodara : Manjalpur

Nr. Shreyas Vidhyalaya, Nalini House,
Manjalpur, Vadodara - 390 011, INDIA
T : +91 265 3300400, 2633200, 2632044
F : +91 265 2632400

Bharuch:

SUNSHINE GLOBAL HOSPITAL
Adarsh Market, Panchbatti
Station Road, Bharuch - 392 001.
T : +91 2642 266800
F : +91 2642 267800

33

→ Medial Compressive displacement
of Trachea & esophagus noted.

HRCT Lung (21/9/24), I do not have
↓.

Lobulated Mixed density soft tissue
lesion along (L) lobe of Thyroid &
Inferior extension to level of Suprasternal
Notch & Compression displacement
of Trachea (R) laterally & smooth
displacement of (L) neck vessels.

23/9/24

OIB

—
○ Throat

On Hypoth
↓

BVC → (N)

S. creat - 0.4

C-TSH - 2.6

T₃ - 1.9

T₄ - 77.2

Hb - 14.6

ABC - 130

SIB: Dr. Yash

Low care

—
30/9/24

↑
After

TO test thyroidean


SHIVAM CHEST CLINIC
 Allergy, Asthma & Sleep Medicine

Dr. Samir Gami MD
 Consultant Chest Physician & Intensivist

 205-208 Zenon building, Opp unique hospital, Near Opera House, Civil char Rasta, soso circle lane, Surat
 FOR APPOINTMENT : 0261 2972977 | E-mail : samirgami.dr@gmail.com

Patient Name :	Mona knanji Upadhyay	Bill No :	4780
		Date :	3-10-24

No.	Description	Charge	Amount
1	New Consulting	-	1000/-
2	OLD Consulting		
	FITNESS		
4	VERY OLD Consulting		
5	Chest X ray		
6	PFT - (Pulmonary Function Test)		
7	FOT - (Forced Oscillation Technique)		
8	DLCO - (Diffusing Capacity of the Lungs For Carbon Monoxide)		
9	FENO		
10	6MWT - (6-Minute Walk Test)		
11	Skin Prick Allergy Test		
12	ECG	-	200/-
13	POLYSOMNOGRAPHY		
14	SLIT - (Sublingual Immunotherapy)		/
15	TAPPING		/
16	Others		/
17			/
18			
19			
In Words :		TOTAL	200/-

Receiver's Sign


 For, SHIVAM CHEST CLINIC
 Authorised Sign

(31)

Dr. Samir Gami, MD

Chest Physician and Allergy Specialist

MANOJKUMAR - UPADHYAY (55Y / M)

(S-33142) | +91 7490010078

03 October 2024 01:48 PM

PERSONAL HISTORY

- MARITAL STATUS
 - Married: yes
- CHILDREN
 - 2
- OCCUPATION
 - corporation - deputy project manager

COMPLAINS/SYMPOTOMS

- PREOPERATIVE ASSESSMENT
- PRE OPERATIVE ASSESSMENT
 - left hemithyroid+isthamotomy

PAST HISTORY

- BRONCHITIS BF 1 MONTH

FAMILY HISTORY

- GRAND MOTHER - BR ASTHMA

HABIT

- NO ADDICTION

CO-MORBID CONDITION

- NO CO-MORBID CONDITION

LAB/PATHOLOGY

- CBC
 - Hbg: 14.8 g/dL
 - WBC: 7320 cmm
 - PLT: 291000 K/uL
- 1/10/24
- CREATINE
 - value: 0.4
- TSH
 - 2.6
- T4
 - 77.7
- SGPT
 - detail: 19.0 U/L
- HBA1C
 - 5.6%
- VIT D3
 - VIT D3: 19.5 NG/ML
- HIV
 - non reactive
- HBSAG
 - negative
- INR
 - 1.20
- VIT B12
 - value: 191 PG/ML
- CHEST X RAY
 - Date: 4/9/24
 - normal
- HISTOPATHOLOGY AND

VITAL SIGNS:

W:- 81.5 KG
 BP SYSTOLIC:- 133126/84 SITTING
 PULSE:- 98/MIN
 SPO2:- 96%

GENERAL ADVICE

- CAN BE TAKEN FOR SURGERY



Cure Allergy

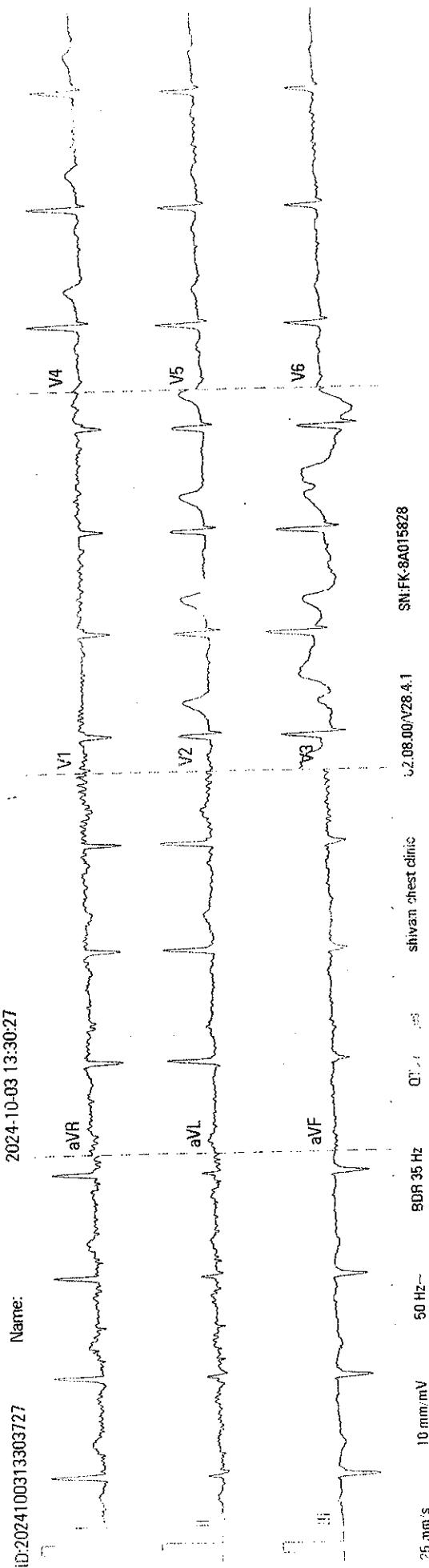

SHIVAM CHEST CLINIC
 Allergy, Asthma & Sleep Medicine

Page | 1

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Pranay Kumar - Upadhyay

SS - M



29

Pratham Endocrine & Diabetes Centre

UG-1 & 2, Milestone-Canal Point, beside INS Hospital, Nr. Kharvannagar BRTS canal
 Rd., Khatodra Wadi, Surat, Gujarat, India
 PIN: 395002 | CONTACT NO: 7572804770

Dr. Pradip Dalwadi
 DM (Endocrinologist)

OPD RECEIPT			
PATIENT NAME:	MR. MANOJ KUMAR UPADHYAY	RECEIPT NO:	P26791
AGE/GENDER:	55 YEARS / M	RECEIPT DATE:	11 OCTOBER 2024
UHID:	P33478		
IN ACC. OF:	DR.PRADIP DALWADI		
ADDRESS:	BHIMRAD, SURAT, GUJARAT, INDIA		

Received with thanks, amount of ₹ 700.00 towards the following:

INVOICE: P31056

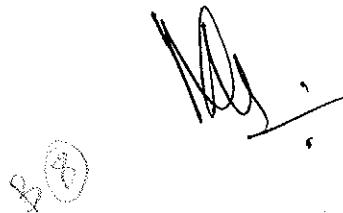
NO.	PARTICULARS	UNIT	RATE	AMOUNT
1	Follow-up Appointment - Dr. Pradip Dalwadi	1	700.00	700.00
	TOTAL(₹)		700.00	700.00
				BILLED AMOUNT (₹) 700.00
				TOTAL PAYABLE AMOUNT(₹) 700.00
				PAID AMOUNT(₹) 700.00

PAYMENT METHOD: CASH

(₹)SEVEN HUNDRED ONLY

For, Pratham Endocrine & Diabetes Centre

AUTHORIZED SIGNATORY






Pratham

Endocrine & Diabetes Centre

28
Dr. Pradip P. Dalwadi

MD, DM (Endocrinologist)
Consultant Adult & Pediatric Endocrinologist
Gold Medalist (Mumbai)
Reg. No. G-39513

Digitally Signed by: DR PRADIP P DAWADI IN INDIA 2025 & ENDocrinology

Manoj Kumar Upadhyay (55Y / M)
(P33478) | +91 7490010078

11 October 2024 06:31 PM

COMPLAINS/SYMPOTMS

- FOLLOW UP WITH REPORTS

COMMENT:- H/O : LEFT FOLLICULAR THYROID NODULE
SUBTOTAL THYROIDECTOMY WAS DONE ON 5 OCT

BIOPSY : LEFT HEMITHYROID WITH ITHMECTOMY
S/O : FOLIUCULAR ADENOMA

ON GOING RX

TAB ROCALTROL 2-2-2-2
TAB SHELICAL 500 2-2-2-2

VITAL SIGNS:

BP:- 140/88 HR:- 57/MIN W:- 83.3 KG

INVESTIGATION

[11-10-24] SERUM CALCIUM: 9.7

[23-09-24] SERUM CREATININE: 0.9 EGFR - CREATININE CLEARANCE(MIN/1.73M2): 101

DIAGNOSIS

- SOLITARY THYROID NODULE IN LEFT LOBE (53 X 41 X 53 MM - TR3)
- FNAC - BETHESDA CATEGORY IV (FOLLICULAR NEOPLASM)
- EUTHYROID STATUS AT PRESENT
- POST OP SUBTOTAL THYROIDECTOMY (2024)

Rx

No	Name	Dose	Details	Quantity
1	CAP.ROCALTROL 0.25MCG	2 - 2 - 2	दृश्योग्र - 10 दिवस	60
	Calcitriol 0.25 MCG	✓ ✓ ✓		
	Timing: 2-शाम तास्ता पछी, 2-ग्नयेरे जम्मा पछी, 2-राते जम्मा पछी			
2	TAB.SHELICAL 500MG	2 - 2 - 2	दृश्योग्र - 10 दिवस	60
	CALCIUM CARBONATE 500MG + CHOLECALCIFEROL 250 IU			
	Timing: 2-शाम तास्ता पछी, 2-ग्नयेरे जम्मा पछी, 2-राते जम्मा पछी			

TEST REQUESTED

- T3 - T4 - TSH
- CBC
- CALCIUM

PRESCRIPTION PREPARED BY

DR BHAVESH SONI

Prepared By

Dr. Bhavesh Mandvekar

Tracday

01.00 AM

Dr. Nitesh Patel (Ex-Dr.)
9512729696

DR. PRADIP P. DALWADI
MD(Medicine) (Endocrinology)
Consultant Endocrinologist
Reg. No. G-39513

Page 14

UG-1 & UG-2, Milastone Canal Point, Nr. INS Hospital, BRTS Canal Road, Khatodara, Surat-395002.

SUNSHINE GLOBAL HOSPITAL

ADDRESS: BESIDERELIANCE SMART BAZAR,
DUMAS-PILOOD ROAD, SURAT – 395007
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23
B(9)

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APPOINTMENT BOOKING NO: 6357565614

OPD Registration And Billing

UMR #	SHS0005058	Receipt No	MSREC24021099		
Patient Name	Mr. MANOJKUMAR UPADHYAY	Age/Sex	56Y(s)/Male		
Patient Type	CASH	Group Bill No	GBMS0011687		
Ref By	WALKIN	Bill Date	22-Oct-2024 13:50		
Consultant	Dr.FARIDA WADIA	Phone No	7490010078		
S No	Test Code	Service Name	Bill No	Qty	Rate
1	DM0250	Dr.FARIDA WADIA - FOLLOW-UP VISIT - CONSULTATION	SOC24003491	1	600.00
					600.00
					Total Amount : 600.00
					Net Amount : 600.00
					Receipt Amount : 600.00
					Cash Amount : 600.00
Remarks :					
 SHS0005058			 SOC24003491		
Created By : chandanpatel			Create Date : 22-Oct-2024 13:50		
Print By : CHANDANPATEL			Print Date : 22-Oct-2024 13:50		

GST NO: 24AADCB2295A1Z7
MSME: UDYAM-GJ-24-000404
U85110GJ2007PTC051728

PAN: AADCB2295A
CIN:



Mr. Manoj Kumar Upadhyay 22/10/24

① Pre case 1. s/o

Clo 1

Gum weakness +

cross Respiration

561m

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(29/10/24). done + BP :-

Adm

Tab. Rocaltrol

2-2

Tabs. Gliben

500mg - 2-2

Thyroxine (75)

1-0-0

② H/o! Lt follicular thyroid nodule

③ OS - 5/10/24

(Subtotal Thyroidectomy)

Post-op - 17 days

④ Hemithyroid + Isthmectomy.

GAPB

(4522925)

Abha 1 ad

Follicular Adenoma

STB. Dr. Sudip
15/10/24 Dalsawar

Tos. sled cat
Taj. Taj - Thyronorm 75
H. Cap Rocaltrol
0-25

Dr. Farida Wadia

M.B.B.S. (Int Surgeon)
Reg. No. 67828

SUNSHINE GLOBAL HOSPITAL
Piplod, SURAT.

Surat: Piplod

Besides Big Bazar, Gaurav Path,
Dumas Road, Surat - 395007.
T : +91 0261 4111000
F : +91 0261 4111001

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Manjalpur, Vadodara - 390 011, INDIA
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F : +91 265 2632400 64

Bharuch:

Adarsh Market, Panch batti,
Station Road, Bharuch - 392 001.
T : +91 2642 265000
F : +91 2642 267800

(25)

2) Tcs. Alcitos P x (20)

1 - C P 20Tons
G/H

3) Tcs. Sompoz D x (20)

1 - C P 26Tons - 21m
82Tons W

SUNSHINE GLOBAL HOSPITAL

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APPOINTMENT BOOKING NO: 6357565614

 24
 B.O
Consultation Receipt

UMR NO	: SHS0005058	LOCATION	: Surat
PATIENT NAME	: Mr.MANOJKUMAR UPADHYAY	BILL DATE	: 29-Oct-2024 13:37
AGE/SEX	: 56Y(s)/Male	BILL NO.	: SOC24003824
RELATIVE NAME	:	RECEIPT NO.	: MSREC24022790
ADDRESS	: B 1202 BELLA CROSS SOC,BHIMRAD	MOBILE NO	: 7490010078
REFERRED BY	: WALKIN	HC No	:
PATIENT TYPE	: Cash		
PARTICULARS	Service Status	RATES(RS.)	
ENT SURGERY			
Dr.FARIDA WADIA	A	600.00	
Mode Of Payment : Cash		Total Amount :	600.00
Received With Thanks an amt of(RUPEES) : Six Hundred Rupees Only		Pat Payable Amount :	600.00
		Receipt Amount :	600.00
		Cash Amount :	600.00
SHS0005058		SOC24003824	
Create By : chandanpatel		Create Date : 29-Oct-2024 01:37 PM	
Print By : CHANDANPATEL		Print Date : 29-Oct-2024 01:38 PM	

GST NO: 24AADCB2295A1Z7
 MSME: UDYAM-GJ-24-000404
 U85110GJ2007PTC051728

 PAN: AADCB2295A
 CIN:

SUNSHINE GLOBAL HOSPITALADDRESS: BESIDERELIANCE SMART BAZAR,
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APPOINTMENT BOOKING NO: 6357565614**OPD Registration And Billing**

UMR #	: SHS0005058	Receipt No	: MSREC24022846
Patient Name	: Mr. MANOJKUMAR UPADHYAY	Age/Sex	: 56Y(s)/Male
Patient Type	: CASH	Group Bill No	: GBMS0012657
Ref By	: WALKIN	Bill Date	: 29-Oct-2024 15:15
Consultant	: Dr.TRUPTI S PATEL	Phone No	: 7490010078

S No	Test Code	Service Name	Bill No	Qty	Rate	Amount
1	SG6365	AUDIOMETERY (Dr.TRUPTI MODI)	SOB24002613	1	1,200.00	1,200.00
2	SG6369	SISI (SHORT INCREMENT SENSITIVITY INDEX)	SOB24002613	1	300.00	300.00
3	SG6370	TDT (THE TONE DECAY TEST)	SOB24002613	1	300.00	300.00
						Total Amount : 1,800.00
						Net Amount : 1,800.00
						Receipt Amount : 1,800.00
						Card Amount : 1,800.00

Remarks :



SHS0005058



SOB24002613

Created By : chandanpatel

Create Date : 29-Oct-2024 15:15

Print By : CHANDANPATEL

Print Date : 29-Oct-2024 15:15

 GST NO: 24AADCB2295A1Z7
 MSME: UDYAM-GJ-24-000404
 U85110GJ2007PTC051728

 PAN: AADCB2295A
 CIN:



Mr. Munoj Kumar Upadhyay 561m 22

29/10/24 Sunshine
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C/O

B/L ear binnitis,
c sweating.

Dos - 5/10/24 } Subtotal
Thyroidectomy.

OIB

On Nasal endoscopy



On Thyroid → NAD

BVC - ①

BTM ②

28/10/24

- TSH - 1.6852

Achs

PTA
+

SISI
+

TDT

R

①T. xl-Jlo → ③o
1-04

②T. Coronova → ⑥o
2-2

Dr. Farida Shah

Surat: Piplod

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F : +91 265 2632400

Bharuch:

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F : +91 2642 267800

(2)

PTA → Bill valid, Stopping Sample

TDT → (R) +ve (O) -ve

SISI (R) +ve (O) -ve
Trupti Modi



PURE TONE AUDIOGRAM

Name : Manoj Kumar Upadhyay

Age : 35y Sex : F/M M

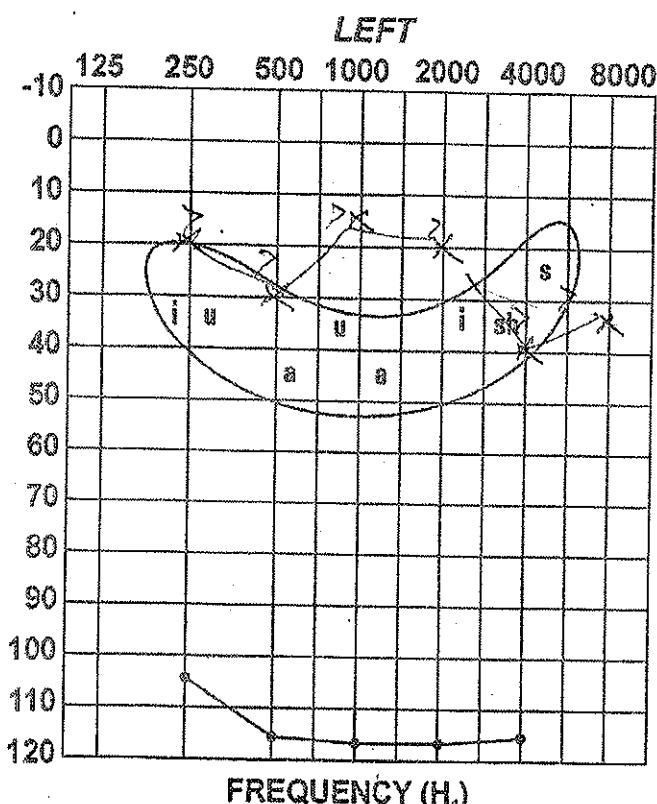
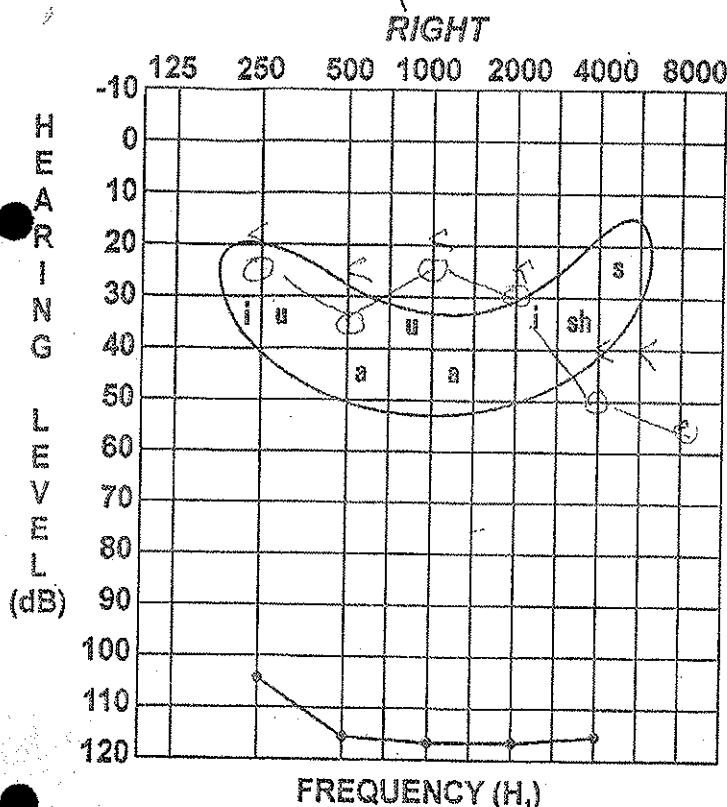
Audiologist : Trupti Modhi

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Case No. :

Date : 29/10/24

Pre Post Treatment :



KEY TO SYMBOL	R	L
Airconduction:-		
Unmasked	○	×
Masked	△	□
No Response	○	×
Boneconduction		
Unmasked	<	>
Masked	↓	↑
No Response	↓	↓
Sound Field	S	S
No Response	S	↓

TEST	EAR		
	RIGHT		
	LEFT		

TEST CONDITIONS	RELIABILITY
Quiet <input checked="" type="checkbox"/>	Good <input checked="" type="checkbox"/>
Mod Noise <input type="checkbox"/>	Fair <input type="checkbox"/>
Noisy <input type="checkbox"/>	Poor <input type="checkbox"/>

EAR	RIGHT				LEFT			
	500	1000	2000	4000	500	1000	2000	4000
FREQUENCY IN Hz	-ve	-ve	-ve	-ve	-ve	-ve	-ve	-ve
Tone Decay Test	-ve	-ve	-ve	-ve	-ve	-ve	-ve	-ve
SISI / STAT / WEBER	-ve	-ve	-ve	-ve	-ve	-ve	-ve	-ve

DIAGNOSIS :

Bilateral SLOPping SNHL

Comment :

Trupti Modhi
Audiologist



Kiran Multi Super Speciality Hospital

Nr Sumul Dairy, Surat - 395004

Tel : 0261-7161111 Fax:

E-mail : info@kiranhospital.com Website:
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Cash Bill OP

Bill No : OPCA25/342332
 Bill Date Time : 23/09/2024 3:47 PM
 Lab No : 1732138

UHID : 245596
 Patient Name : Mr. Manojkumar Kallashbabu Upadhyay
 Contact No : 7490010078
 Address : E-504, TIRUPATI SHYAM VILLA, BHIMRAD CANAL ROAD, SURAT, Gujarat, INDIA, - 395007

Payer : Cash
 Gender/Age : Male/56 Yr
 Presc. Doctor : Dr. YASH LAVANA

Sponsor : Cash
 Referred By : Self
 Department : ENT UNIT A

SNo.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	Creatinine	135.00	1.00	135.00	0.00	135.00	135.00	0.00
				Gross Amount				135.00
				Net Amount				135.00
				Payer Amount				0.00
				Patient Amount				135.00
				Amt Received (Rs.)				135.00

By Cash: 135.00

Amount Received in words (Rs.) One Hundred Thirty Five Only.

Narration :

Authorised Signatory

પેશોળોજના રીપોર્ટ માટે સેપ્પલ કલેક્શનની સુવિધા ઘરે બેઠા ઉપલબ્ધ છે. સંપર્ક નંબર: ૯૭૨૫૪૩૨૧૧૧
 તમારા રીપોર્ટ જોવા માટે ડિરાણ હોસ્પિટલ ના પેશન્ટ પોર્ટલ reports.kiranhospital.com ની મુલાકાત લો

Printed By: TIYA.1

Prepared By: TIYA 10SHT

Printed Date: 23/09/2024

Page: 1 of 1

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Cash Bill OP

Bill No : OPCA25/420840
 Bill Date Time : 04/11/2024 5:29 PM
 Lab No :

UHID : 245596
 Patient Name : Mr. Manojkumar Kallashbabu Upadhyay
 Contact No : 7490010078
 Address : E-504, TIRUPATI SHYAM VILLA, BHIMRAD CANAL ROAD, SURAT, Gujarat, INDIA, - 395007

Sponsor : Cash
 Referred By : Self
 Department : General Medicine UNIT A

SNo.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	Follow Up Consultation Charge - Super Specialist (Dr. HARDIP MANIAR)	1000.00	1.00	1000.00	850.00	150.00	150.00	0.00
				Gross Amount				1000.00
				Contribution by Kiran Hospital				850.00
				Net Amount				150.00
				Payer Amount				0.00
				Patient Amount				150.00
				Amt Received (Rs.)				150.00

By Cash: 150.00

Amount Received in words (Rs.) One Hundred Fifty Only.

Narration :

Authorised Signatory

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(18)

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E-mail : info@kiranhospital.com Website:
www.kiranhospital.com**Cash Bill OP**

Bill No : OPCA25/339019
 Bill Date Time : 21/09/2024 1:19 PM
 Lab No : 1730414

UHID	: 245596	Payer	: Cash	Sponsor	: Cash
Patient Name	: Mr. Manojkumar Kailashbabu Upadhyay	Gender/Age	: Male/56 Yr	Referred By	: Self
Contact No	: 7490010078	Presc. Doctor	: Dr. HARDIP MANIAR	Department	: General Medicine UNIT A
Address	: E-504, TIRUPATI SHYAM VILLA, BHIMRAD CANAL ROAD, , SURAT, Gujarat, INDIA, - 395007				

SNo.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	Glucometer Charge (RBS) 86 mg /dl	33.00	1.00	33.00	0.00	33.00	33.00	0.00
2	CBC with MP	225.00	1.00	225.00	0.00	225.00	225.00	0.00
3	ROUND OFF	2.00	1.00	2.00	0.00	2.00	2.00	0.00

Gross Amount	260.00
Net Amount	260.00
Payer Amount	0.00
Patient Amount	260.00
Amt Received (Rs.)	260.00

By Cash: 260.00

Amount Received in words (Rs.) Two Hundred Sixty Only.

Narration :

Authorised Signatory

Kiran Multi Super Speciality Hospital

Nr Sumul Dairy, Surat - 395004

Tel : 0261-7161111 Fax:

E-mail : info@kiranhospital.com Website:
www.kiranhospital.com**Cash Bill OP**

Bill No : OPCA25/339043
 Bill Date Time : 21/09/2024 1:35 PM
 Lab No : 1730429

UHID	: 245596	Payer	: Cash	Sponsor	: Cash
Patient Name	: Mr. Manojkumar Kailashbabu Upadhyay	Gender/Age	: Male/56 Yr	Referred By	: Self
Contact No	: 7490010078	Presc. Doctor	: Dr. HARDIP MANIAR	Department	: General Medicine UNIT A
Address	: E-504, TIRUPATI SHYAM VILLA, BHIMRAD CANAL ROAD, , SURAT, Gujarat, INDIA, - 395007				

SNo.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	CT Scan - HRCT Thorax	2700.00	1.00	2700.00	0.00	2700.00	2700.00	0.00

Gross Amount	2700.00
Net Amount	2700.00
Payer Amount	0.00
Patient Amount	2700.00
Amt Received (Rs.)	2700.00

By Cash: 2700.00

Amount Received in words (Rs.) Two Thousand Seven Hundred Only.

Narration :

Authorised Signatory

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 તમારા રીપોર્ટ જોવા માટે ક્રિએટિવ રેપોર્ટ્સ હોસ્પિટલ ના પેશેજ પાર્ટિલ reports.kiranhospital.com ની મુલાકાત લો



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MULTI-SUPER-SPECIALITY HOSPITAL & RESEARCH CENTER



N-2020-0727



National Health Authority

DR.HARDIP MANIAR

M.D.;MRCP-UK (SCE); EBDRM(EUROPE) IDCCM(HINDUJA MUMBAI)
 CONSULTANT PULMONOLOGIST,
 CRITICAL CARE AND SLEEP MEDICINE.

NAME:-

AGE:-

K/C/O

C/O

Cough

fever

Resp - d/B rms

UHID:-

DATE:-

PR

SpO₂

BP

T.

Wt.

Ronelw

Bronchitis

TD + Fl. Pneumonia.

or mediastinal LMP.

CBc - RBS by glucometer

Investigation

HRCT LONG p. do As AP.

CLINICAL IMPRESSION :- PT Blowing w/
size surra

FOLLOW UP :-

DR. HARDIP MANIAR(M.D.)

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Nr. Sunnil Dairy, Surat-Gujarat - 395 004.

Ph.: 0261-7161111 | E-mail : inquiry@kiranhospital.com | www.kiranhospital.com

(16)

21/09

Cp. Antiflu

(75)

1.0

(65)

gm

1. Dolo

(65)

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(10)

gm

2. Pantopae - Dr.

1.0

(10)

gm

15

**Kiran Multi Super Speciality Hospital**

Nr Sumul Dairy, Surat - 395004

Tel : 0261-7161111 Fax:

E-mail : info@kiranhospital.com Website:
www.kiranhospital.com**Cash Bill OP**

Bill No : OPCA2S/342981
 Bill Date Time : 23/09/2024 5:38 PM
 Lab No : 1732323

15

UHID : 245596
 Patient Name : Mr. Manojkumar Kailashbabu Upadhyay
 Contact No : 7490010078
 Address : E-504, TIRUPATI SHYAM VILLA, BHIMRAD CANAL ROAD, , SURAT, Gujarat, INDIA, - 395007

Payer : Cash
 Gender/Age : Male/56 Yr
 Presc. Doctor : Dr. YASH LAVANA

Sponsor : Cash
 Referred By : Self
 Department : ENT UNIT A

SNo.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	CT Scan - Neck With Contrast	4170.00	1.00	4170.00	0.00	4170.00	4170.00	0.00
2	CT Contrast Injection Charge	630.00	1.00	630.00	0.00	630.00	630.00	0.00

Gross Amount	4800.00
Net Amount	4800.00
Payer Amount	0.00
Patient Amount	4800.00
Amt Received (Rs.)	4800.00

By Cash: 4800.00

Amount Received in words (Rs.) Four Thousand Eight Hundred Only.

Narration :

Authorised Signatory

**Kiran Multi Super Speciality Hospital**

Nr Sumul Dairy, Surat - 395004

Tel : 0261-7161111 Fax:

E-mail : info@kiranhospital.com Website:
www.kiranhospital.com**Cash Bill OP**

Bill No : OPCA2S/342266
 Bill Date Time : 23/09/2024 3:28 PM
 Lab No : 1732114

14

UHID : 245596
 Patient Name : Mr. Manojkumar Kailashbabu Upadhyay
 Contact No : 7490010078
 Address : E-504, TIRUPATI SHYAM VILLA, BHIMRAD CANAL ROAD, , SURAT, Gujarat, INDIA, - 395007

Payer : Cash
 Gender/Age : Male/56 Yr
 Presc. Doctor : Dr. YASH LAVANA

Sponsor : Cash
 Referred By : Self
 Department : ENT UNIT A

SNo.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	T3,T4,TSH (Thyroid Profile) (TFT)	500.00	1.00	500.00	0.00	500.00	500.00	0.00

Gross Amount	500.00
Net Amount	500.00
Payer Amount	0.00
Patient Amount	500.00
Amt Received (Rs.)	500.00

By Cash: 500.00

Amount Received in words (Rs.) Five Hundred Only.

Narration :

Authorised Signatory

પેશોળોજુના રીપોર્ટ માટે સેમ્પલ કલેક્શનની મુવિધા ઘરે દેખા ઉપલબ્ધ અ. સંપર્ક નંબર: ૭૭૨૯૪૩૨૧૧૧
 તમારા રીપોર્ટ જોવા માટે કિરણ હોસ્પિટલ ના પેશન્ન પોર્ટલ reports.kiranhospital.com ની મુલાકાત લો

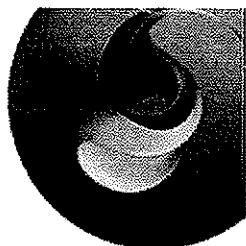
(14)



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◆ +(91)-261-2332316, 23323161 +91 98795 04116, +91 90999 97172 ◆ info@synergyimaging.co.in ◆ www.synergyimaging.co.in

RECEIPT

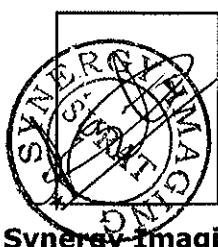
Patient Name : MANOJKUMAR UPADHYAY
Reference Doctor: Dr. SELF

Date : 26-Sep-2024
Receipt No. : 240926027

Sr. No.	Test	Rate
1	USG NECK (THYROID)	1800

Amount In Words :- Rupees One Thousand Eight Hundred Only.

Total Amt : 1800
Received Amt : 1800
Balance Amt : 0



For Synergy Imaging



Kiran Multi Super Speciality Hospital

Nr Sumul Dairy, Surat - 395004

Tel : 0261-7161111 Fax:

E-mail : info@kiranhospital.com Website:
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B
Cash Bill OP

Bill No : OPCA25/351886
 Bill Date Time : 27/09/2024 1:16 PM
 Lab No : 1736624

UHID : 245596	Payer : Cash	Sponsor : Cash
Patient Name : Mr. Manojkumar Kailashbabu Upadhyay	Gender/Age : Male/56 Yr	Referred By : Self
Contact No : 7490010078	Presc. Doctor : Dr. YASH LAVANA	Department : ENT UNIT A
Address : E-504, TIRUPATTI SHYAM VILLA, BHIMRAD CANAL ROAD, , SURAT, Gujarat, INDIA, - 395007		

SNo.	Particulars	Rate (₹)	Unit	Total	Disc.	Net Amt	Pat Amt	Payer Amt
1	FNAC procedure + reporting	1000.00	1.00	1000.00	0.00	1000.00	1000.00	0.00
				Gross Amount		1000.00		
				Net Amount		1000.00		
				Payer Amount		0.00		
				Patient Amount		1000.00		
				Amt Received (Rs.)		1000.00		

By Cash: 1000.00

Amount Received in words (Rs.) One Thousand Only.

Narration :

Authorised Signatory

પેશોળોજના રીપોર્ટ માટે સેમ્પલ કલેક્શનની ચુંબિધા ઘરે બેઠા ઉપલબ્ધ છે. સંપર્ક નંબર: ૯૭૨૬૪૩૨૧૧૧
 તમારા રીપોર્ટ જોવા માટે ક્રિએટિવિટીના પેશન્ટ પોર્ટલ reports.kiranhospital.com ની મુલાકાત લો

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Prepared By: Swapnil Chaudhari

Printed Date: 27/09/2024

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H-2020-0727

National Health Authority
12

DEPARTMENT OF LABORATORY MEDICINE

Patient Name	Mr. Manojkumar Kailashbabu Upadhyay	Lab No	1732138
UHID	245596	Sample Date	23/09/2024 3:47 PM
Age/Gender	56 Yrs/Male	Receiving Date	23/09/2024 3:52 PM
Bed No/Ward	OPD	Report Date	23/09/2024 5:38PM
Referred By	Dr. YASH LAVANA	Report Status	Final

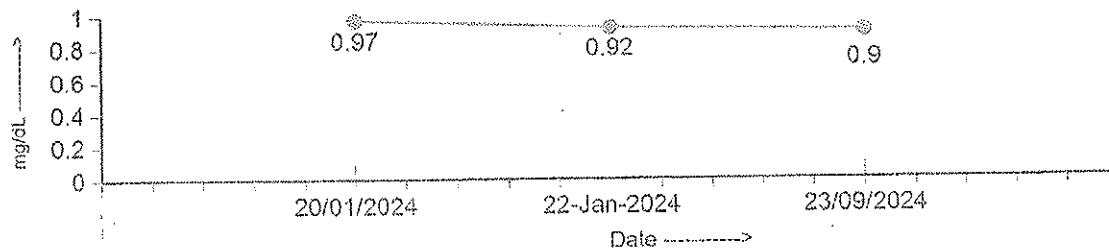
Test Name	Result	Unit	Biological Ref. Range	Method
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BIOCHEMISTRY

CREATININE

Creatinine 0.90 mg/dL 0.66 - 1.25 Sample: Serum
 Enzymatic ,IFCC
 IDMS
 standardised , Dry Chemistry

Creatinine



--End Of Report--



Qd
Dr. PRASHANT PATEL
MBBS, MD-PATHOLOGY
Consultant - Pathology

Printed on 30/09/2024 11:57

Page: 1 Of 1

Test reports are subjects to technical limitations and should clinically co-related. Laboratory may be contacted whenever required.

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II-2020-0727

National Health Authority

DEPARTMENT OF LABORATORY MEDICINE

Patient Name	Mr. Manojkumar Kailashbabu Upadhyay	Lab No	1732114
UHID	245596	Sample Date	23/09/2024 3:28 PM
Age/Gender	56 Yrs/Male	Receiving Date	23/09/2024 3:52 PM
Bed No/Ward	OPD	Report Date	23/09/2024 5:20PM
Referred By	Dr. YASH LAVANA	Report Status	Final



Test Name	Result	Unit	Biological Ref. Range	Method
-----------	--------	------	-----------------------	--------

BIOCHEMISTRY

T3,T4,TSI (THYROID PROFILE) (TFT)			Sample: Serum
THYROID STIMULATING HORMONE	2.609	μIU/mL	0.400 - 4.049
T 3	1.94	nmol/L	1.49 - 2.60
T 4	77.70	nmol/L	71.20 - 171.00

Reference Range of TSH in pregnancy

1st trimester : 0.1298 - 3.120 uIU/ml

2nd trimester : 0.2749 - 2.652 uIU/ml

3rd trimester : 0.3127 - 2.947 uIU/ml

Note : Change in reference range of TSH.

--End Of Report--



Dr. PRASHANT PATEL
MBBS, MD-PATHOLOGY
Consultant - Pathology

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H-2020-0727



National Health Authority

10

DEPARTMENT OF RADIOLOGY & IMAGING

UHID	245596	RIS No. :	1732323
Patient Name :	Mr. Manojkumar Kailashbabu Upadhyay	Age/Gender :	56 Y/M
Referred By :	Dr. YASH LAVANA	Bed No/Ward :	OPD
Bill Date :	23/09/2024 5:38 PM	Scan Date :	23/09/2024
Report Date :	24/09/2024 2:31 PM	Report Status :	Final

EXAMINATION: 256 SLICE CONTRAST CT SCAN OF NECK

Pre & post-contrast CT scan of Neck was performed on ultrafast (256 slice) CT scanner with slice thickness of 5 mm with bolus tracking. Post processing perform to obtain 1 mm, MIP and MPR images.

Clinical profile: Follow up case of left thyroid lesion.

OBSERVATION

- Enlarged left lobe of thyroid with large heterogeneous nodule.
 - Lesion measures 45 x 51 x 60 mm (AP x TR x CC)
 - Medial compressive displacement of trachea and esophagus noted.
 - No extracapsular extension.
 - Heterogeneous post-contrast enhancement.
 - Central non-enhancing colloid regions stop noted
 - Mild lateral displacement of left side.
 - Inferior 1 cm retrosternal extension noted.
- No significant cervical lymphadenopathy.
- Few anterior marginal osteophytes at few cervical levels.

Oral cavity appears normal.

The nasopharynx and oropharynx appears normal.

Bilateral parotid and submandibular glands appear normal.

No cervical lymphadenopathy.

The hyoid bone and thyroid, cricoid and arytenoids cartilages are normal.

Rest of cervical spine appears normal.

The visualized paranasal sinuses appear unremarkable.

IMPRESSION

- Enlarged left lobe of thyroid gland with 6 cm heterogeneous nodule - appears benign in nature. FNAC correlation.

---End of Report---

Dr. ANDREW JOHN S
MBBS, MD (G-58081)
Consultant Radiologist
Kiran Multi Super Speciality Hospital
& Research Centre, Surat.

Dr. ADARSHA
DNB-Resident
Kiran Multi Super Speciality Hospital
& Research Centre, Surat.

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H-2020-0727

National Health Authority

DEPARTMENT OF LABORATORY MEDICINE

Patient Name	Mr. Manojkumar Kailashbabu Upadhyay	Lab No	1730414
UHID	245596	Sample Date	21/09/2024 1:19 PM
Age/Gender	56 Yrs/Male	Receiving Date	21/09/2024 1:48 PM
Bed No/Ward	OPD	Report Date	21/09/2024 4:29PM
Referred By	Dr. HARDIP MANIAR	Report Status	Final

Test Name	Result	Unit	Biological Ref. Range	Method
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HAEMATOLOGY

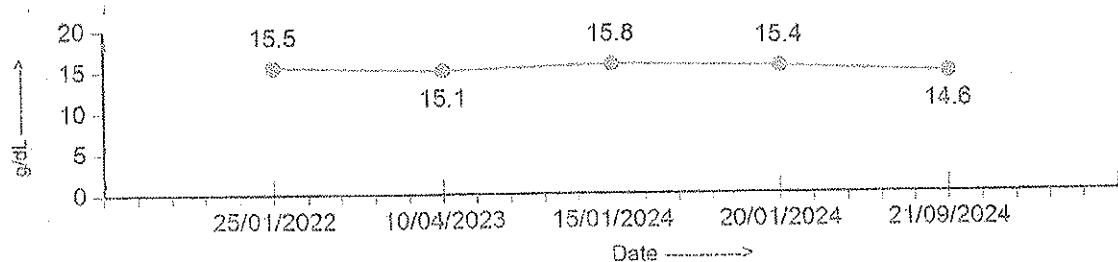
CBC WITH MP

Sample: WB

RBCs parameter

Haemoglobin	14.6	g/dL	13.0 - 17.0	SLS Method
-------------	------	------	-------------	------------

Haemoglobin



RBC COUNT	4.62	10 ⁶ /µL	4.50 - 5.50	Impedance method
Packed cell volume	44.5	%	40.0 - 50.0	Particle Counter (Calculated)
MCV	96.3	fL	82.0 - 97.0	Derived
MCH	31.6	pg	27.0 - 33.0	Derived
MCHC	32.8	g/dL	32.0 - 36.0	Derived
RDW cv	13.2	%	11.5 - 14.5	Particle Counter (Calculated)
RDW sd	47.1 H	fL	30 - 45	Particle Counter (Calculated)
Micro RbcS	0.50	%	0.14 - 5.79	Impedance
Macro RbcS	4.4	%	3.1 - 8.8	Impedance
PLATELETs parameter				
Platelet count	248000	/µL	150000 - 450000	Impedance method
MPV	9.30	fL	8.00 - 13.00	Impedance method
PDW	9.7	fL	9 - 17	Impedance method



Dr. PARESH VAGHELA
G-18835, MD
Consultant Pathologist

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H-2020-0737



National Health Authority

DEPARTMENT OF LABORATORY MEDICINE

Patient Name	Mr. Manojkumar Kailashbabu Upadhyay	Lab No	1730414
UHID	245596	Sample Date	21/09/2024 1:19 PM
Age/Gender	56 Yrs/Male	Receiving Date	21/09/2024 1:48 PM
Bed No/Ward	OPD	Report Date	
Referred By	Dr. HARDIP MANIAR	Report Status	Final



WBCs parameter

WBCs count	8860	/µL	4000 - 10000	Flow Cytometry
DLC				
Neutrophils	83.0 H	%	40.0 - 70.0	Flow Cytometry
Lymphocytes	5.8 L	%	20.0 - 40.0	Flow Cytometry
Monocytes	9.1 H	%	4.0 - 7.0	Flow Cytometry
Eosinophils	1.5 L	%	2.0 - 4.0	Flow Cytometry
Basophils	0.6	%	0.0 - 1.0	Flow Cytometry
Immature Granulocyte	0.50	%	0.00 - 1.00	Flow Cytometry
NRBCs	0.00	%	0.00 - 1.00	Flow Cytometry
Absolute Neutrophil count	7360	/µL	1500 - 8000	Flow Cytometry
Absolute Lymphocyte count	510 L	/µL	1000 - 3000	Flow Cytometry
Absolute Monocyte count	810	/µL	200 - 1000	Flow Cytometry
Absolute Eosinophil count	130	/µL	20 - 500	Flow Cytometry
Absolute Basophil count	50	/µL	2 - 100	Flow Cytometry
Absolute IG count	40.00	/µL	0.00 - 60.00	Flow Cytometry

PARASITES

Malarial parasite	Not Detected			Light microscopy
-------------------	--------------	--	--	------------------

HFLC

High fluorescence lymphocyte	0.1	%	< 1 : Normal > 1% : Reactive lymphocytes	Flow Cytometry
------------------------------	-----	---	---	----------------

Research parameter

Neutrophil Granularity	157.1	SI	134.0 - 163.2	Flow Cytometry
Neutrophil RI	45.5	F.I	39.8 - 53.0	Flow Cytometry
Neutrophil WY	593.0		> 641 - P/o Infection	Flow Cytometry

--End Of Report--

R..
Dr. PARESH VAGHELA
G-18835, MD
Consultant Pathologist

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H-2020-0727



National Health Authority

DR.HARDIP MANIAR

M.D.;MRCP-UK (SCE); EBDRM(EUROPE) IDCCM(HINDUJA MUMBAI)

CONSULTANT PULMONOLOGIST,

CRITICAL CARE AND SLEEP MEDICINE.

NAME:-

AGE:-

K/C/O

C/O

Manoj Kumar Upadhyay

UHID:-

DATE:- 23/09/2024

PR 82/min

97-1.

SpO₂

BP 112/80 mmHg

T.96.7 °F

Wt. 81.4kg

Investigation

FOLLOW UP :-

CLINICAL IMPRESSION :-

DR. HARDIP MANIAR(M.D.)

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H-2020-0727

National Health Authority

NAME: Munmoj Kumar Upadhyay

DATE: 21/09/2024

WT:

UHID: 215596

ALLERGY:

AGE/SEX: 58/m

PREGNANT/LACTATION/NONE

Smp : Ps.Rx :

(1) PSORTOP oint 1(A)

+-----+

(dove 87%) UZ)

(2) SKYN SLEEK cream 1(A)

+-----+

(3) T. MOUZEE (ABF)

+-----o

DR NANDITA PATEL.MBBS, MD (CONSULTANT, DERMATOLOGIST,
TRICOLOGIST & COSMETOLOGIST)

REG NO : G-29530

INSTAGRAM ACCOUNT : dr_nandita_md

EMAIL : nandita.patel@kiranhospital.com

Mobile No:-9265837962/0261-7161136

FOLLOW UP DATE:- 1, 10, 24

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Nr. Sumil Dairy, Surat 840004.

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H-2020-0727



National Health Authority

DEPARTMENT OF RADIOLOGY & IMAGING

UHID	245596	RIS No.:	1730429
Patient Name :	Mr. Manojkumar Kailashbabu Upadhyay	Age/Gender :	56 Y/M
Referred By :	Dr. HARDIP MANIAR	Bed No/Ward :	OPD
Bill Date :	21/09/2024 1:35 PM	Scan Date :	21/09/2024
Report Date :	21/09/2024 2:42 PM	Report Status :	Final

MDCT (256 SLICE) SCAN - HRCT OF LUNGS

Contiguous axial CT sections of the chest were taken using high spatial frequency algorithm.

Clinical profile: Fever, cough, weakness.

FINDINGS

Evidence of lobulated mixed density approx. 5 x 5 cm sized soft tissue lesion seen along left lobe of thyroid with inferior extension to level of suprasternal notch with compression displacement of trachea right laterally with smooth displacement of left neck vessels.

Evidence of subtle focal bronchiolar wall thickening seen in both lungs predominantly lower lobes.

Small subcentimeter sized nodule seen in right lung lower lobe.

Tiny calcified focus seen in both lung lower lobes.

Linear thin subpleural atelectatic bands seen in left lung lower lobe.

Subcentimeter sized mediastinal lymphnodes noted.

Bilateral lung parenchyma shows no evidence of interstitial thickening or honeycombing.

Trachea and Main Bronchi show no gross CT evident abnormality.

Bony cage shows no focal lesion.

No evidence of Pleural Effusion noted.

Visualized liver, spleen, suprarenal regions appear normal.

Page 1 of 2

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National Health Authority

DEPARTMENT OF RADIOLOGY & IMAGING

UHID	245596	RIS No. :	1730429
Patient Name :	Mr. Manojkumar Kailashbabu Upadhyay	Age/Gender :	56 Y/M
Referred By :	Dr. HARDIP MANIAR	Bed No/Ward :	OPD
Bill Date :	21/09/2024 1:35 PM	Scan Date :	21/09/2024
Report Date :	21/09/2024 2:42 PM	Report Status :	Final

IMPRESSION:

- Small subcentimeter sized nodule in right lung lower lobe with tiny calcified nodules in both lung lower lobes. (Granulomatous)
- Subtle focal bronchiolar wall thickening in both lungs predominantly lower lobes.
- Linear thin subpleural atelectatic bands seen in left lung lower lobe.

Note: Lobulated mixed density soft tissue lesion along left lobe of thyroid with inferior extension to level of suprasternal notch with compression displacement of trachea right laterally with smooth displacement of left neck vessels. (Underlying Thyroid Lesion likely)

Please correlate clinically / CT Neck Contrast.

Thank you for the courtesy for this referral.

---End of Report---

Dr. UDAY SURANA

Sr. Consultant - Radiology MBBS(G-20490), DMRE,
MD(G-6923), DNB

Page 2 of 2

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N-2020-0727



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DR. HARDIP MANIAR

M.D.; MRCP-UK (SCE); EBDRM(EUROPE) IDCCM(HINDUJA MUMBAI)
CONSULTANT PULMONOLOGIST,
CRITICAL CARE AND SLEEP MEDICINE.

NAME:- *menoy kumar*
AGE:-

UHID:-
DATE:-

K/C/O

C/O

*Cough**Fever**Resp - drows*

{

PR
SpO₂
BP
T.
Wt.

*Ronelos**Bronchitis**TD + PI. Pneumonia**or Mediastinal LMP*

Investigation

CBc - RBS by glucometer

FOLLOW UP :-

**8.* *THRT long* *PI. do As Af.*
CLINICAL IMPRESSION :- PT Blowing w/
sore throat

DR. HARDIP MANIAR(M.D.)

Letter Head meant only for OPD / IPD Patient Records or Investigation Reports.

Nr. Sumul Dairy, Surat, Gujarat - 395 004.

Ph.: 0261-7161111 | E-mail : inquiry@kiranhospital.com | www.kiranhospital.com

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Neuberg Abha

CLINICAL LABORATORIES

Neuberg Abha Laboratory Pvt Ltd

16

BILL CUM RECEIPT



Name : Mr MANOJKUMAR KAILASHBABU UPADHYAY
 Age : 55 Yrs
 Branch : Aadi Vatsalya
 Doctor : Dr. Farida H.Wadia M.S.(E.N.T.),D.L.O.

Invoice No / Date : 41003603843 / 05-Oct-2024 14:06
 Gender : Male
 Email :
 Contact No : 9079864558

Test Name	Expected Report Time	Remarks	Amount
Biopsy - Radical BP25	09-Oct-2024 03:37 PM	TAT mentioned is for working days for >90% samples. TAT may exceed if specimen is autolysed / not properly fixed in formalin or in unusual cases requiring additional work up and clinicopathological co-relation. Clinical history along with name and contact no of referring doctor are mandatory for accurate diagnosis.	2500.00

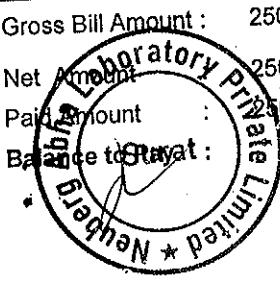
Receipt No	Receipt Date	Amount	Mode	Received By
R-036-24-25-27639	05-Oct-2024 14:10	2500.00	Paytm POS	SURAJ

Gross Bill Amount :	2500.00
Net Amount :	2500.00
Paid Amount :	2500.00
Balance to Pay :	0.00

Amount Paid in Words : Two Thousand Five Hundred Only

Authorized By : Suraj G Omle

Visit out website <https://lims.neubergabha.com/#/laboratory/public> to download report. Userid:
 41003603843 Password: C32M673A



Neuberg Abha Laboratory Private Limited

(Previously known as Abha Laboratory Pvt Ltd)

Regd. Office : 2nd Floor, Rajratna Chambers,
 Dabgarwad, Zapata Showroom Lane,
 Nr. Bhagat, Surat - 395003
 Ph.: 0261-2425253 / 9099945480
 Time: Monday to Saturday 8 am to 8:00 pm
 Sunday : 8 am to 1 pm

Shankheswar Complex,
 Opp. Raymont Showroom, Nr. Torrent Power
 Majuragate, Surat - 395001
 Ph.: 0261-2465061, 62, 63/ 9909946480
 Time: Monday to Saturday 8 am to 7 pm
 Sunday Closed

Aadi Vatsalya Building 8-A,
 Opp. Old RTO Office, Ring Road,
 Athwa Gate, Surat - 395002
 Mob.: 3500500 / 7211126999
 Time: Monday to Saturday 7 am to 8:30 pm
 Sunday : 7 am to 6 pm

● Lab timings may vary during holidays and in case of unforeseen conditions ●

Email : info@neubergabha.com | Website : www.neubergabha.com | CIN : U74999GJ2020PT

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Neuberg Abha

CLINICAL LABORATORY

Neuberg Abha Laboratory Pvt Ltd

BILL CUM RECEIPT

Name : Mr MANOJKUMAR KAILASHBABU UPADHYAY
 Age : 55 Yrs
 Branch : Aadi Vatsalya
 Doctor : Dr. Farida H.Wadia M.S.(E.N.T.),D.L.O.

Invoice No / Date : 41003603770 / 05-Oct-2024 12:50
 Gender : Male
 Email :
 Contact No : 9079864558

Test Name	Expected Report Time	Remarks	Amount
Biopsy - Radical BP25	09-Oct-2024 02:20 PM	TAT mentioned is for working days for >90% samples. TAT may exceed if specimen is autolysed / not properly fixed in formalin or in unusual cases requiring additional work up and clinicopathological co-relation. Clinical history along with name and contact no of referring doctor are mandatory for accurate diagnosis.	2500.00

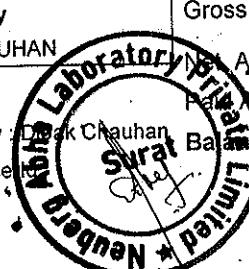
Receipt No	Receipt Date	Amount	Mode	Received By	Gross Bill Amount :
R-036-24-25-27624	05-Oct-2024 12:51	2500.00	Paytm POS	DIPAK.CHAUHAN	2500.00

Amount Paid in Words : Two Thousand Five Hundred Only

Authorized By : Deep Chauhan

Paid Amount : 2500.00

Balance to Pay : 0.00

Visit our website <https://lims.neubergabha.com/#/laboratory/public> to download report. Use Ref ID : 41003603770 Password: Z19N670D

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