HOSPITAL BILL

SANDHYASHI HOPITAL

M. : 7428177717
9212735382

B-48, Sector-5, Bawana Industrial Area, Dehi-110039

Serial No. 524

Uhid No. 714/21

Date 3/3/21

Name Manish Kumar W/o, S/o, D/o Ramesh Grover Age 47 Sex Male

Adress House 2324 Sector 44C, New S+

Date of Admission 24/2/21 Date of Discharge 3/3/21

Cont. No. 9041890101 Disease Acute Lumbago

1.	O.T. Charges		
2.	Room Rent 2000x7		14,000
3.	Bed Charges		7000
4.	Doctor fees 500x2x7		4200
5.	Nursing Charges 300x2x7		
6.	Miscellaneous	ABIANGAM 150x7	1050
7.	Lab Charge	KATI BAST 150x7	1050
8.	Consumable charge	BAST 1000x7	7000
9.	Procedure charge		
10.	Medicine	Tab pain Cure 2 tds PC	500
		Tab Shoulder 2 tds PC	500
		Tab Live Cur 2 tds BD	500
		TOTAL	54700

Fifty Four thousand Seven hundred

Terms & Conditions :-
NOT VALID FOR MEDICO LEGAL PURPOSE

For SANDHYASHI HOPITAL

Signature

SANDHYASHI HOSPITAL

(A Unit of Sandhya Medicity India Pvt. Ltd)
B-48,49, Sec. 5, Bawana Industrial Area, Delhi-39

Sandhya Medicity

UHID No. 00/1764/21
Bed No. 06

ADMISSION & DISCHARGED RECORD

Name of Patient (रोगी का नाम) Manish Grover

Name of Father's (पिता का नाम) Ramesh Grover

Date of Admission (भर्ती की तिथि) 24/2/21

Time of Admission (समय) 11 am Age(उम्र) 47 Y Sex (लिंग) M

Reffering Doctor (सहायक उपचारक) Dr. Raju

Doctor Incharge (संचालक उपचारक) Dr Vikas Gupta

Date of Discharge (छुट्टी तिथि) 3/3/21 Time of Discharge(छुट्टी का समय) 5 PM

Operation (IF any) Panch Karma Treatment

रोग निश्चय (Diagnosis)(भर्ती का समय) Severe Back Pain

रोग निश्चय (Diagnosis)(छुट्टी का समय) Acute lumbago

Address & Phone (पता एवं फोन नं.) House no 2322 Sec-44-C-Chandigarh Sec 47 PO CHD Chandigarh 160047

Result	Cured/relived	Left against Medical Advice	Investigation only	Discharge request	Expired

UNDER TAKING FOR TREATMENT INVESTIGATION & FINANCE ETC.

I want to get the patient at sandhyashi hospital at my own and I am ready for and eventually and outcome this concernt is given of my own free will after having been made to understand the contents and implications of this documents.

मैं अपनी मर्जी से संध्यासी अस्पताल में भर्ती हो रहा हूँ। मैं तैयार हूँ मेरे साथ होने वाली चिकित्सा पद्यति के लिए, और मैं सब कुछ सोच समझ कर करवा रहा हूँ। एवं मैने जो विवरण दिया है वह पूर्णतः सही है।

Dated (दिनांक) Manish Witness (प्रत्यक्षी)

Signature (हस्ताक्षर) Manish

Relationship of patient (रोगी से सम्बंध)

SANDHYASHI HOSPITAL
B-48-49, Sector-5,
Bawana Industrial Area, Delhi-39
PH. 7428177717

Terms & Conditions

1. I have opted on my own for admission into this hospital and will pay the bills as per hospital rules and regulations.

2. The management reserves the right to admit or discharge the case amedment/modify rules. Regulations and the charges without notice or assigning any reason there of.

3. Facilities provided in the room are maintained in working order but any failure in their functioning does not affect the charge and the management accepts no liability for the same . The Hospital accepts no responsibility for any loss or inconvenience caused by strike, lock out, water, telephone electricity and air-conditioning failure etc.

4. Patients are advised not be bring any valuable or any jewellery or any other luggage with them. and also advised to deposit. there surplus cash with the hospital and get a receipt The hospital will not be responsible for any loss or left.

5. Suggestions/complaints may be given in writing at the reception.

6. All bills to be paid in cash, cheques are not accepted.

नियम व शर्तें

1. मैंने इस अस्पताल में प्रवेश के लिए अपना खुद का चयन किया है और अस्पताल के नियमों और विनियमों के अनुसार बिल का भुगतान करेगा।
2. प्रबंधन नियमों को संशोधित करने का अधिकार सुरक्षित रखता है। विनियम और बिना किसी पूर्व सूचना के शुल्क या किसी भी कारण को असाइन करना।
3. कमरे में उपलब्ध सुविधाएं कामकाजी क्रम में रखी जाती हैं लेकिन उनके कामकाज में कोई विफलता चार्ज को प्रभावित नहीं करती है और प्रबंधन इसके लिए कोई देयता स्वीकार नहीं करता है। अस्पताल स्ट्राइक,लॉक आउट वॉटर, टेलीफोन, बिजली और एयर कंडीशनिंग विफलता इत्यादि के कारण होने वाली किसी भी हानि या असुविधा के लिए कोई जिम्मेदारी स्वीकार नहीं करता है।
4. मरीजों को सलाह दी जाती है कि वे उनके साथ कोई मूल्यवान या कोई आभूषण या कोई अन्य सामान न लाएं। और जमा करने की भी सलाह दी। अस्पताल के साथ उनके अधिशेष नकद और एक रसीद प्राप्त करें। अतः अस्पताल किसी भी नुकसान या बकाया के लिए जिम्मेदार नही होगा।
5. रिसेप्शन पर लिखित में सुझाव / शिकायतें दी जा सकती हैं।
6. सभी बिलों का भुकतान नकद में किया जाता है। चैक नही लिया जाता है।

Dated (दिनांक).....24/2/21..... Witness (प्रत्यक्षी).....

Signature (हस्ताक्षर).....

Relationship of patient (रोगी से सम्बंध).....

RECEIPT BOOK

SANDHYASHI HOSPITAL

(A Unit Of SANDHYA MEDICITY INDIA PVT. LTD)

B-48, SECTOR-5, BAWANA INDUDTRIAL AREA, DELHI-110039

Authority Ph. No. :7428177717, 9212735382

S. No 1653

Name Manish Grover

Age 47Y Sex M Date 24/2/21

Address Chandigarh Sec-47 Po CHD 160047

Amount 250000 In words

Valid to

Purpose IPD Admission

Collected By

Authorised Signature

RECEIPT BOOK

SANDHYASHI HOSPITAL

(A Unit Of SANDHYA MEDICITY INDIA PVT. LTD)

B-48, SECTOR-5, BAWANA INDUDTRIAL AREA, DELHI-110039

Authority Ph. No. :7428177717, 9212735382

S. No 2100

Name Manish Grover

Age 47 Yrs Sex M Date 3/3/21

Address H.No 2324 Sec-44 Po. CHD

Chandigarh - 9041890101

Amount 29700 In words

Valid to

Purpose Discharge and Medicine.

Collected By

Authorised Signature

SANDHYASHI HOSPITAL
B-48-49, Sector-5,
Bawana Industrial Area, Delhi-39
Ph. 7428177717

HOSPITAL BILL

SANDHYASHI HOPITAL

M. : 7428177717
9212735382

B-48, Sector-5, Bawana Industrial Area, Dehi-110039

Serial No. 524

Uhid No. 714/21

Date 3/3/21

Name Manish Grover W/o, S/o, D/o Ramesh grover Age 47 Sex Male

Adress House 2324, Sector 44C, New 87

Date of Admission 24/3/21 Date of Discharge 3-3-21

Cont. No. 9041890101 Disease Acute lumbago

1.	O.T. Charges		
2.	Room Rent 2000x7		14,000
3.	Bed Charges		
4.	Doctor fees 500x2x7		7000
5.	Nursing Charges 300x2x7		4200
6.	Miscellaneous		
7.	Lab Charge	ABHANGAM 1500x7	10500
8.	Consumable charge	VATI BASTI 1500x7	10500
9.	Procedure charge	BASTI 1000x7	7000
10.	Medicine	Tab pain Cure 2tds BD	500
		Tab Shoolhar 2tds BD	500
		Tab Live Cur 2tds BD	500
	Fifty Four thousand Seven hundred	TOTAL	54700

Terms & Conditions :-
NOT VALID FOR MEDICO LEGAL PURPOSE

For SANDHYASHI HOPITAL

Signature

SANDHYASHI HOSPITAL

(A Unit of Sandhya Health care)

(B-48,49 Sector-05, Bawana Industrial Area, Bawana, Delhi-110039)

UHID...1165.....IPD...00/1704/21 Bed No.....(6).....Date...3/3/2021

F.H.NO. **DISCHARGE FILE**

Patient's Name(रोगीकानाम)..... Manish Grover Age (उम्र)...47 yr Sex (लिंग)...(M)

W/o, S/o, D/o(पिता|पति) ...Ramesh Grovers.....

Address (पता)..H.No. 2322, Sec. 44/C, Chandigarh Sec 47, PO - Chandigarh

Date of Admission (भर्तीकीतारीख) ..24/2/2021 Date of Discharge(छुट्टीकीतारीख)...3/3/2021.....

Time of Admission (भर्तीकासमय).....11 AM.....Time of Discharge(छुट्टीकासमय)...5PM.....

Chief Consultant (मुख्यचिकित्सक)...Dr. Vikas Gupta.....

CHIEF COMPLAINT AND HISTORY (मुख्यतकलीफएवंउसकावृतान्त) C/O - Severe Backpain
- Unable to stand and move
- Pain radiating to right leg from Lower Back

Past Medical History (पुरानाचिकित्सावृतान्त) NAD

Family History (कुटुंबवृतान्त) NAD

Pain Scale – (10/10)

VitaParameters

B. P 120/80 mmHg

P/R 92 bpm

SUGAR 98 mg/dl

WEIGHT 65 kg

HEIGHT 5.4" inch

MENSTRUAL HISTORY

Astha Sthana

1. NADI Vatej-Pittaj
2. MALA (N)
3. MUTRA (N)
4. JIWHA Saaf
5. SHABDA Spashta
6. SPARSHA Mridu
7. AKRUTI (M)
8. DRIKA (M)

Dashvidha Pariksha

1) Prakruti Pittaj-Kaphaj
2) Vikruti (M)
3) Sara (M)
4) Samhana (M)
5) Pramana (M)
6) Satmya (M)
7) Satva (M)
8) Agni Mandagni
9) Vaya (M)
10) Vyayam Shakti (M)

INVESTIGATION

All reports are attached ℰ DIS.

DIANOSIS AND TREATMENT SUMMARY Δ Acute Lumbago

Panchkarma Procedure.

- Kati Basti
- Basti
- Abhyangam

ADVISE ON DISCHARGE Healthy and nutritious diet
Follow up after 7 days

1.WHEN TO OBTAIN EMERGENCY CALL SOS

A Pain in Lowerback
B Swelling in Lowerback
C Ghabrahat | High grade fever.

2.NEXT CONSULTATION

1) Tab. Paincure 2 BD
Tab Livecure 2 BD
Tab Shothhar 2 BD
2) Maharasnadi Kwath 4 tsf BD
x 7 days.

Doctor Name - Dr. Vikas Gupta
Signature with Date :-
Vikas
3/3/2021

SANDHYASHI HOSPITAL

(A Unit of Sandhya Health care)

(B-48,49 Sector-05, Bawana Industrial Area, Bawana, Delhi-110039)

UHID.....17.14.24..... IPD.1214..... Bed No..... Date.3.3.21.....

F.H.NO.

DISCHARGE SUMMARY

Patient's Name (रोगी का नाम) .....Manish grover..... Age (उम्र).....47..... Sex (लिंग) ..Male

W/o, S/o, D/o(पिता|पति) .....Ramesh grover.....

Address (पता) .....House No 2322, Sec 44, C-Chandigarh, Sec 47 (160047)

Date of Admission (भर्ती की तारीख) 24.2.21.....Date of Discharge(छुट्टी की तारीख).....3.3.21.....

Time of Admission (भर्ती का समय).....11AM.....Time of Discharge(छुट्टी का समय).....5pm.....

Chief Consultant (मुख्य चिकित्सक) .....DR Vikas Gupta (M.S).....

CHIEF COMPLAINT AND HISTORY (मुख्य तकलीफ एवं उसका वृतान्त)

C/O Severe Back pain
C/O Unable to Stand and More
C/O Pain Radiating to (R) leg
SLR (R) 45°

Past Medical History (पुराना चिकित्सा वृतान्त) NO H/O DM/HTN/CAD

Family History (कुटुंब वृतान्त) NO

Pain Scale – 10/10

VitaParameters

B.P - 120/80

P/R - 72/M

SUGAR 98/mg

WEIGHT 65

HEIGHT ~~5.5~~ 5.4FF

MENSTRUAL HISTORY

Astha Sthana

1. NADI वातपित्तज
2. MALA Normal
3. MUTRA Clear
4. JIWHA Coated
5. SHABDA Clear
6. SPARSHA Warm
7. AKRUTI Normal
8. DRIKA Normal

Dash vidha Pariksha

1) Prakruti पित्तज वातज
2) Vikruti NO
3) Sara Normal
4) Samhana Normal
5) Pramana Normal
6) Satmya Normal
7) Satva Avar
8) Agni Madhyam
9) Vaya NO
10) Vyayam Shakti Normal

SANDHYASHI HOSPITAL
B-48-49, Sector-5,
Bawana Industrial Area, Delhi-39
Ph. 7428177717

INVESTIGATION EXAMINATION (जाँच)

NO

DIAGNOSIS AND TREATMENT SUMMARY (रोग चिकित्सा वृतांत)

Δ Acute lumbago
- KATI BASTI
- BASTI
- ABHYANGAM

DIET ADVISE ON DISCHARGE (आहार निर्देश Diet As Advise

CONDITION AT THE TIME OF DISCHARGE

HOME ☑ DEAD ☐ REFFERED ☐ LAMA ☐

Follow up (दोबारा कब आना है) After 7 days

1. **WHEN TO OBTAIN EMERGENCY CALL (आपातकालीन समस्या में सम्पर्क)**
PH No.011-40199634 / 7428177717

A) Pain
B) Swelling
C)

2.Medicine After Diseases (औषधि छुट्टी के बाद)

- Tab Pain Cure 2+2+2 BD
- Tab Shallaki 1+0+1 BD
- Tab Liver Cure 1+0+1 BD

Sap Maharishi Kwath 4 oz BD

Dr. VIKAS GUPTA 7428177717
Dr Name Vikas Gupta
Sign
Date 23/2/21

HDFC ERGO General Insurance Company Limited

Policy No. 2825 1002 1939 4201 000

HDFC ERGO
Take it easy!

Policy No :2825100219394201000
Valid From :26/07/2019 Renewal Date: 25 July

Insured Name	Date Of Birth	Gender
Madhav Grover	15/10/2006	M
MANISH GROVER	06/05/1974	M
Bhavna Grover	05/06/1975	F
Shreya Grover	02/07/2001	F

HDFC ERGO General Insurance Company Limited

This card is for identification purpose only.

Card has to be presented to the Network Service Provider at the time of admission/ availing cashless hospitalization or any other services. Insurance claim will be processed in accordance with the policy term & conditions. Card does not guarantee cashless hospitalization or any other service. For more details and updated list of Network Service Provider please refer our website or call our call centre. This card is valid till the time policy is active.

Phone Number	:	1800 2 700 700
Fax Number	:	1860 2000 600
Email	:	healthclaims@hdfcergo.com
Processing Centre	:	HDFC ERGO General Insurance Company Ltd. 5th floor, Tower 1, Steller IT Park, C-25, Sector-62,Noida-201301.
Website	:	www.hdfcergo.com

Policy Benefits Exclusions

Ayush

Your Cover Limit - Upto sum Insured of Rs. 500000

As change is the only constant, we are also improvising our benefits with the requirement of our customers.

With the rich history of Ayurveda in India, we have this feature where **we cover the hospitalization expenses which are covered in inpatient treatment taken under Ayurveda, Unani, Sidha, or Homeopathy.**

The hospitalization expenses for the **Government Hospital** or in any **institute recognised** by the government, accredited by Quality Council of India/National Accreditation Board on Health or any other suitable institutions are **reimbursed**.