



Ramkrishna Sewashram Hospital
(A Multi Speciality Hospital)

In Collaboration With
eNext ICU
WHERE EVERY LIFE COUNTS



Vindhyachal Road, Near Ojhalapool, Mirzapur

JUSTIFICATION

Below the justification / reply of letter from Grievance Cell of Ayushman Bharat Office Mirzapur Reg. no. DHLTH/E/2025/0012307 Dated 11/06/2025.

Pt Vidhya devi age 75/ F was admitted under Dr K M Chaudary (MBBS MD) General Medicine on 03rd June 2025 in ICU on Cash / Paid Basis because her Ayushman card was not in existence (not made).

From Hospital on 04/06/2025 her attendant (Arun Pratap Singh her son) came to know the Vay Vandana Card (70+) senior citizen ayushman Card and then her attendant gave Adhar Card to prepare Vay Vandana Card on 04/06/2025 in evening around 5 pm and from hospital side it was prepared and from 05/06/2025 morning patient was admitted and converted in ayushman Bharat Yojana from that day hospital not charged single Rupee from patient or from her attendant and also gave ayushman Card in printed form to her attendant available (Arun Pratap Singh her son).

As patient / her attendant accepted that her ayushman card was prepared when she was came in emergency till 04/06/2025 until Vay Vandana Card was prepared by Hospital so any hospital is liable to collect the fee of treatment from the patient which is legal too.



Authorized Signatory

Date: 11/06/2025

श्रीमान (शिकायत सं - 600002SD0126993)

दिनांक 11.06.25 को आवेकन श्री.सिंह से 2. pm वा वाली हुई , आवेकन के अनुसार आयुमान कार्ड अपूर्ण होने के बाद भी धरने लिए , अस्पताल से वाली होने वा बताया गया कि यदि अस्पताल इलाज के दिनांक का बिल प्रस्तुत होने वा , लिए गये धरने वापस कर दिया जाएगा।

sm
[Signature]

[Signature]
11/6/25



नर सेवा नारायण सेवा
रामकृष्ण सेवाश्रम हॉस्पिटल

(A Multi Speciality Hospital)



विन्ध्याचल मार्ग, ओझला, मीरजापुर

हेल्प लाइन- 9088-992-889, 9088-994-889

In Collaboration with
eNext ICU
WHERE EVERY LIFE COUNTS

WARD MEDICINE REQUISITION LIST

Name of Patient : Udya Devi Date : 3/6/25 Bed No. 8ml

Sl. No.	Particulars	Quantity
	ly. p.cm. 100ml. — (1)	
	ly. fco-m. 500ml. — (1)	
	IV-Set — (1)	
	Diapery large size — (1)	

ISSUED BY

RECEIVED BY

ORDER BY DUTY DOCTOR

MAA SHARDA DRUGS

Vindhyachal Road, Ojhla., Mirzapur (UP) India

Mirzapur-231001

GSTIN No. 09BEXPD5902A1ZL

Bill Type : Cash Memo

Tel. No. : 9935495547

GST INVOICE

Bill No. : 6367 Date : 03/Jun/2025
Patient Name : VIDHYA DEVI Patient Type : OPD
Doctor Name : DR. K. M. CHOUDARY Remarks : VIDHYA DEVI

S.No.	Item Name	Pack	Expiry	Batch No	Qty	MRP	GST %	Net Amount
1	DOLOCROT 100ML	1	31/Aug/2026	4918671	1	350.00	12.00	350.00
2	ISM-500ml	1	31/Jan/2027	f50141	1	217.00	12.00	217.00
3	IV-Set	1	30/Sep/2029	G24J020674	1	100.00	12.00	100.00
4	DAIPER	1	31/Dec/2027	g24I087514	1	60.00	12.00	60.00

* Please Consult Doctor before using the Medicines.

* Loose Items & Cut. Tabs & Caps will not be taken back.

E. & O. E. Prepared by : jatin

CGST : 38.95 SGST : 38.95 Gross Amt. : 727.00

Total Amt. : 727.00

Net Amt. : 727.00

RAMKRISHNA SEWASHRAM HOSPITAL

Vindhyachal Road, Ojhla,

Mirzapur (UP) India

PATHOLOGY Receipt

Receipt No. : 1148
 Lab No. : 2486 ¹²⁴⁸⁶¹
 Patient Name : Mrs. VIDYA DEVI
 Consultant Name : EMERGENCY
 Net Amount : 1460.00

Date : 03/Jun/2025 19:43:00
 UHID No. : 58360
 Age/Sex : 77 Years/Female

Test Name	Amount
CBC (Compelete Blood Count)	200.00
CRP TEST(QUANTATIVE)	350.00
LFT	350.00
S. Urea	80.00
CREATININE	80.00
ELECTROLYTES	400.00

Payment Mode : Cash

Gross Total : 1460.00

Net Amount : 1460.00

Total Payment Recd Rs.	1460.00
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Prepared By : AZMAT

Authorized Signatory

RAMKRISHNA SEWASHRAM HOSPITAL

Vindhyachal Road, Ojhla,

Mirzapur (UP) India

OUTSOURCE PATHOLOGY Receipt

Receipt No. : 123
 Lab No. : 322 ¹³²²¹
 Patient Name : Mrs. VIDYA DEVI
 Consultant Name : EMERGENCY
 Net Amount : 2350.00

Date : 03/Jun/2025 19:44:00
 UHID No. : 58360
 Age/Sex : 77 Years/Female

Test Name	Amount
BLOOD C & S	1800.00
URINE CULTURE TEST	550.00

Payment Mode : Cash

Gross Total : 2350.00

Net Amount : 2350.00

Total Payment Recd Rs.	2350.00
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Prepared By : AZMAT

Authorized Signatory

Not Valid For Medicolegal Purposes

RAMKRISHNA SEWASHRAM HOSPITAL

Vindhyachal Road, Ojhla,

Mirzapur (UP) India

X-RAY Receipt

Receipt No. : 323
 Lab No. : 357
 Patient Name : Mrs. VIDYA DEVI
 Consultant Name : EMERGENCY
 Net Amount : 200.00

Date : 03/Jun/2025 19:44:00
 UHID No. : 58360
 Age/Sex : 77 Years/Female

Test Name	Amount
X-Ray Chest PA View	200.00
Gross Total : 200.00	
Net Amount : 200.00	

Payment Mode : Cash

Total Payment Recd Rs.	200.00
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Prepared By : AZMAT

Authorized Signatory

Not Valid For Medicolegal Purposes

A Dataman Software (0512) 2376505,2317191

Printed on 03/Jun/2025 19:44



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 विन्ध्याचल मार्ग, ओझला, मीरजापुर
 हेल्प लाइन- 9088-992-889, 9088-994-889

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WARD MEDICINE REQUISITION LIST

Name of Patient : self Vidya Devi Date : 3/6/25 Bed No. ICU-1 सुबह

Sl. No.	Particulars	Quantity
	Catheter - 14 No	①
	Urobag	①
	Belly	①
	RT tube 16 No	①
	inj. Stirocit	① + ①
	NS 100ml	① + ②
	Dispo some	①
	T- Rosulip Gold 20	①
	IVSET	①
	Vilo 20 fixer	① + ①

ISSUED BY

inj. Nitro 1gr
 ISO-M some
 inj- Parlo P

RECEIVED BY

ORDER BY DUTY DOCTOR

MAA SHARDA DRUGS

Vindhyachal Road, Ojhla, Mirzapur (UP) India

GSTIN No. 09BEXPD5902A1ZL

Mirzapur-231001

Bill Type : Cash Memo

Tel. No. : 9935495547

GST INVOICE.

Bill No. : 6388
Patient Name : VIDYA DEVI
Doctor Name : DR. K. M. CHOUDARY

Date : 04/Jun/2025
Patient Type : IPD
Remarks :

S.No.	Item Name	Pack	Expiry	Batch No	Qty	MRP	GST %	Net Amount
1	Catheter No.14	1	31/Dec/2029	G24A120507	1	190.00	12.00	190.00
2	Urine Bag	1	28/Feb/2030	g25c050599	1	160.00	5.00	160.00
3	LOX Jelly 30GM	1	31/Dec/2026	l1348	1	36.28	12.00	36.28
4	Ryles Tube 16	1	31/Jul/2029	g24h011182	1	81.00	12.00	81.00
5	NETICOL 2ML	1	31/Oct/2026	1324078	2	209.80	12.00	419.60
6	NS 100ml	1	31/Mar/2028	5d259	3	22.03	12.00	66.09
7	Syring 50ml	1	31/Jan/2030	G25B020683	1	50.00	12.00	50.00
8	ROSULIP GOLD 20	10	30/Nov/2026	24526CA818	1	29.32	12.00	29.32
9	IV-Set	1	30/Sep/2029	G24J020674	1	100.00	12.00	100.00
10	B.D VEINFLAN 20	1	31/Aug/2029	4247876	1	250.00	12.00	250.00
11	Fixatur	1	31/Jan/2028	025ad24	1	50.00	12.00	50.00
12	MEROBAX 1GM	1	30/Sep/2026	DLK240415	1	1067.07	12.00	1067.07
13	ISM-500ml	1	31/Jan/2027	f50141	1	217.00	12.00	217.00
14	GERPAN 40	1	31/Jan/2027	64807	1	56.50	12.00	56.50

* Please Consult Doctor before using the Medicines.

CGST : 143.78 SGST : 143.78 Gross Amt. : 2772.86
Cash 2773.00 Round Off : 0.14

Continued on Next Page



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हेल्प लाइन- 9088-992-889, 9088-994-889

WARD MEDICINE REQUISITION LIST

Name of Patient : vidya devi Date : 4/6/25 Bed No. 110-1

Sl. No.	Particulars	Quantity
	<u>Protein powder Sugar free</u>	<u>1</u>

ISSUED BY :

RECEIVED BY

ORDER BY DUTY DOCTOR

MAA SHARDA DRUGS

Vindhyachal Road, Ojhla,, Mirzapur (UP) India

Mirzapur-231001

GST INVOICE

GSTIN No. 09BEXPD5902A1ZL

Bill Type : Cash Memo

Tel. No. : 9935495547

Bill No. : 6448

Date : 04/Jun/2025

Patient Name : VIDYA DEVI

Patient Type : IPD

Doctor Name : DR. K. M. CHOUDARY

Remarks :

S.No.	Item Name	Pack	Expiry	Batch No	Qty	MRP	GST %	Net Amount
1	PROTOSURE DM	1	31/Jul/2026	nhp24434	1	990.00	18.00	990.00
2	DAIPER	1	29/Feb/2028	XL	2	60.00	12.00	120.00

* Please Consult Doctor before using the Medicines.

* Loose Items & Cut. Tabs & Caps will not be taken back.

E. & O. E. Prepared by : jatin

CGST : 81.94 SGST : 81.94 Gross Amt. : 1110.00

Total Amt. : 1110.00

Net Amt. : 1110.00

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Authorized Signatory

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