Monthly Statement - OCTOBER 2026

Information as per the scheme framed by the Hon'ble High Court Bombay in W.P.(PIL) No. 3132/2004 Whether Indigent Patient Fund information regarding IPF Account.

Sr. No.	Name of the Hospital	Total No. Of Patient * (***other than the Indigent & Weaker Section Patient)***	Gross billing of Patient # ***(other than the Indigent & Weaker Section Patient)***	Opening Balance of IPF	Amount received from Bank Interest	Total Amount Credited to IPF Account i.e. 2% of the Gross billing amount ***(other than the Indigent & Weaker Section***	Total amount of Donation received from all sources ***(as per clause 5 of the scheme and thereby credited to the IPF)***	Arrears	Total amount credited to the IPF Account (6+7+8+9)	Amount of bill of Indigent Patient debited from IPF	Amount of bill of Weaker Section Patient debited from IPF	Total amount spent from IPF Account (11+12)	Balance amount in the IPF (9-10)	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1	SNJB's Ayurved & Multispecialty Hospital. Chandwad 423-101, Nashik	6,187	4,40,390	2,30,709	0.00	8,808	0.00	0.00	8,808	0.00	0.00	0.00	2,39,517	

Indigent Patient

Sr. No.	Name of the Hospital	Total No. of Operational Bed	Total No. of Operational Beds reserved and earmarked for the Indigent Patient	Total No. of Indigent Patient	Total No. of Indigent Patient to whom treatment provided.	Amount spent from the IPF account for the respective patients.	Remarks.
1	2	3	4	5	6	7	8
1	SNJB's Ayurved & Multispecialty Hospital. Chandwad 423-101, Nashik	110	11	0	0	0.00	

Total No. of Indigent Patient	0	
Total No. of Indigent Patient to whom treatment provided.	0	
Means remaining	0	Patient are merely examine and gives medicine to them, not admitted .

Weaker Section Patients

Sr. No.	Name of the Hospital	Total No. of Operational Bed	Total No. of Operational Beds reserved and earmarked for Weaker Section Patient	Total No. of Weaker section Patient	Total No. of Weaker Section Patient to whom treatment provided.	Amount spent from the IPF account for the respective patients.	Remarks.
1	2	3	4	5	6	7	8
1	SNJB's Ayurved & Multispecialty Hospital. Chandwad 423-101, Nashik	110	11	0	0	0.00	

Total No. of Weaker section Patient	0
Total No. of Weaker section Patient to whom treatment provided.	0
Means remaining	0

Patient are merely examine and gives medicine to them, not admitted .

निर्धन व दुर्बल घटकांतील रुग्णांवर मोफत व सवलतीच्या दराने करण्यात आलेल्या उपचारांची/वैद्यकीय सेवेची माहिती दर्शविणारे मासिक विवरणपत्र

OCTOBER 2026

अ. क्र.	रुग्णालयाचे नाव	रुग्णालया मधील एकुण उपलब्ध खाटा	बीपीटी ॲक्ट, 1950 चे कलम 41 कक नुसार निर्धन व दुर्बल घटकांतील रुग्णांसाठी उपलब्ध होणा-या खाटांची संख्या		महिन्यामध्ये उपचार केलेल्या रुग्णांची संख्या		रकाना 3 व 4 पैकी बाह्य रुग्ण व आंतर रुग्ण संख्या	उपचाराचे स्वरूप	चालू महिन्यातील रुग्णालयाचे एकुण उत्पन्न (निर्धन व दुर्बल घटकांतील रुग्णांची देयके वगळून)	महिन्यातील एकुण उत्पन्नापैकी निर्धन व गरीब रुग्णांवरील उपचारासाठी 2% प्रमाणे उपलब्ध झालेला निधी (IPF)	रकाना 8 मध्ये दर्शविलेल्या रकमेपैकी महिन्यात झालेला एकुण खर्च (मोफत, मेडीकल व सवलतीच्या दराने झालेला खर्च वेगवेगळा दर्शवावा)	तातडीच्या प्रसंगी एखाद्या रुग्णास अन्य रुग्णालयात हलविले आहे काय ? असल्यास कोणत्या कारणास्तव आणि कोणत्या रुग्णालयात, वाहनाची व्यवस्था कोणी केली.	रुग्णालयांकडे स्वत:च्या रुग्णवाहीका आहेत काय ? असल्यास किती ?	किती रुग्णांवर उपचार करण्याचे नाकारण्यात आले आणि कोणत्या कारणास्तव.
			मोफत दराने	सवलतीच्या दराने	मोफत दराने	सवलतीच्या दराने								
		1	2		3	4	5	6	7	8	9	10	11	12
1	श्री नेमिनाथ ब्रम्हाचार्यश्रम संचलित, आयुर्वेद आणि मल्टीस्पेशालिटी हॉस्पिटल. चांदवड 423-101, नाशिक	११०	११	११	0	0	बाह्यरुग्ण - 00 आंतररुग्ण: - 00	नियामित	४,४०,३९०	८,८०८	मोफत:- 00 मेडिकल ;- 00 सवलतीच्या दराने :- 00	नाही	२	निरंक

Consolidated Information Relating to Compliance of Scheme Under Section 41 AAA of the BPT Act 1950

Month :- OCTOBER 2026

Sr. No.	Name & Reg No. of the Trust/Hospital	No. Of I.P.D. Patients	No. Of OPD Patients.	Gross Billing of IPD & OPD	Amount credited to IPF A/c	No of Indigent Patients treated (100%)	Bill Amount	No. Of Weaker section patients treated	Bill Amount	Medical Amount
1	SNJB's Ayurved & Multispecialty Hospital. Chandwad 423-101, Nashik Regd. No. E-35	133	6,187	4,40,390	8,808	0.00	0.00	0.00	0.00	0.00

माहे - ऑक्टोबर - 2026 निर्धन रुग्ण निधी मासीक विवरणपत्र

01-10-2026 TO 31-10-2026

अ. क्र.	धर्मादाय रुग्णालायाचे नाव	OCTOBER - 26 सुरवातीस निर्धन रुग्ण निधीतील शिल्लक	OCTOBER - 26 मध्ये निर्धन रुग्ण निधीत जमा झालेली निवळ रक्कम.	OCTOBER - 26 मध्ये एकुण खर्ची झालेली रक्कम	निर्धन रुग्ण निधीतील एकुण शिल्लक
1	श्री नेमिनाथ ब्रम्हाचार्यश्रम संचलित, आयुर्वेद आणि मल्टीस्पेशालिटी हॉस्पिटल. चांदवड 423-101, नाशिक	2,30,709	8,808	0.00	2,39,517.00

One time proforma for ascertaining compliance by private hospital of EWS Quata

Name of state/ UT Maharashtra

SNJB's Ayurved & Multispecialty Hospital. Chandwad 423-101, Nashik

Sr. No.	Name and address of private Hospitals granted free/Concessional land by state/UT Government	No. and date of allotment letter	Details of Concessional/ free allotement of land	Specific Condition for grant of free concessional treatement to EWS patient stipulated in allotement letter	Wether compliance by hospital of column (e) (Yes/No)	(i) whether regular review by state authorities of column (f) (Yes/No) (ii) Frequency of review	Telephone No. and Email Id State Nodal Officer	Remarks
a.	b.	c.	d.	e.	f.	g.	h.	i.
01)	SNJB's Ayurved & Multispecialty Hospital. Chandwad 423-101, Nashik	N.A.	N.A.	N.A.	N.A.	N.A.	N.A.	

FORMAT FOR INSPECTION

Name of the Hospital :- SNJB's Ayurved & Multispecilty hospital, Chandwad, Nashik No. of Beds :- 11 Month :- OCTOBER - 26

IPF Fund Opening Balance for the Month	Total Receipts in Month from IPF Fund, Donation & Interest	Total IPF Fund Available for Month (1+2)	Expenditure on Indigent Patients							
			Sr. No.	Name of the Patients	Diagnosis	Type of surgery/ Treatment	Date of Admission	Date of Discharge	Amount debited from IPF of Billable items (drugs, Spl inv & Consumeables)	Total amount debited from IPF for Month
1	2	3	4	5	6	7	8	9	10	11
-	-	-	-	-	-	-	-		-	

FORMAT FOR INSPECTION

Name of the Hospital :- SNJB's Ayurved & Multispeciality hospital, Chandwad, Nashik No. of Beds :- 11 Month :- OCTOBER - 26

Expenditure on Economically Weaker Patients								Total Expenditure	Closing Balance of IPF Account 3-(11+19)
Sr. No.	Name of the Patients	Diagnosis	Type of surgery/ Treatment	Date of Admission	Date of Discharge	Amount debited from IPF of Billable items (drugs, Spl inv & Consumables)	Total amount debited from IPF for Month		
12	13	14	15	16	17	18	19	20	21
-	-	-	-	-	-	-	-	-	-