



Invoice

Invoice No: 252601483

Patient Name: Ms. Shabina Khan/HOC/2510/01074

Pay Mode: Card

Invoice Date: 29-10-2025

Doctor: Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Minor Dressing	500.00
2	Post Mastectomy Lymphatic Aspiration	1200.00
3	20cc Syringe	33.00
4	18 g needle	8.00
5	Gauze	100.00
6	11 no. Blade	8.00
7	Followup	1500.00

Total Amount: 3349.00

Less Discount (-): 0.00

Grand Total: 3349.00

Received Amount (-): 3349.00

Balance Amount: 0.00

This is a computer generated invoice hence no signature is required