



Invoice

Invoice No: 252601871

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

Pay Mode: Card

Invoice Date: 20-12-2025

Doctor: Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Category A - Chemotherapy	7000.00
2	Nursing Charges	2000.00
3	Daycare Bed Charges	2000.00
4	Non medical Service MRD charges & Bio Medical Waste	800.00
5	Paxman Scalp Cooling Charges	8000.00

Total Amount: 19800.00

Less Discount (-): 0.00

Grand Total: 19800.00

Received Amount (-): 19800.00

Balance Amount: 0.00

This is a computer generated invoice hence no signature is required