



## **Invoice**

**Invoice No:** 252602232

**Patient Name:** Ms. Indumati Shetty/HOC/2512/01227

**Pay Mode:** UPI

**Invoice Date:** 23-01-2026

**Doctor:** Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Followup	1500.00
2	Major Dressing	1000.00
3	Post Mastectomy Lymphatic Aspiration	1200.00
4	Gauze	150.00
5	20cc Syringe	30.00
6	18 g needle	8.00

**Total Amount: 3888.00**

**Less Discount (-): 0.00**

**Grand Total: 3888.00**

**Received Amount (-): 3888.00**

**Balance Amount: 0.00**

This is a computer generated invoice hence no signature is required