

Tax Invoice

Patient Name:	Mrs AMNA OBAID ALI ALZAABI	Bill No:	STAR-ICR-24043
Age/Sex:	48 Y / F	Bill Date:	08-12-2025
Address:	U.A.E.	Admission Date:	08-12-2025
UHID No	STAR.0000073116	Discharge Date:	08-12-2025
Name of the Doctor	Dr. MILONI GADOYA	Ward :	SINGLE ROOM
Department	GYNAECOLOGY	Secondary Doctor	

Sl.No	Date	Description of Service	SAC Code	Qty	Rate	Gross Value	Discount	Total Value
1	Admission Charge / MRD / PAC Charges							
	08-12-2025			1	3,100.00	3,100.00	0.00	3,100.00
						Sub Total:	0.00	3,100.00
2	Bed Charge							
	08-12-2025	ROOM CHARGES		1	7,000.00	7,000.00	0.00	7,000.00
						Sub Total:	0.00	7,000.00
3	Surgeon Fees							
	08-12-2025	Dr. MILONI GADOYA		1	55,000.00	55,000.00	0.00	55,000.00
	08-12-2025	ASSISTANT SURGEON		1	5,000.00	5,000.00	0.00	5,000.00
						Sub Total:	0.00	60,000.00
4	Service							
	08-12-2025	OPERATION THEATRE CHARGES		1	62,800.00	62,800.00	0.00	62,800.00
	08-12-2025	ANAESTHESIA CHARGES		1	32,600.00	32,600.00	0.00	32,600.00
	08-12-2025	NURSING CHARGES		1	2,500.00	2,500.00	0.00	2,500.00
	08-12-2025	RMO CHARGES		1	3,000.00	3,000.00	0.00	3,000.00
	08-12-2025	INSTRUMENT CHARGES		1	15,500.00	15,500.00	0.00	15,500.00
	08-12-2025	DIET		1	800.00	800.00	0.00	800.00
	08-12-2025	FOOD CHARGES		1	350.00	350.00	0.00	350.00
						Sub Total:	0.00	1,17,550.00
5	Inventory Item							
	12-08-2025	NEEDLE 18X1.5G	9018	3	3.40	10.20	0.00	10.20
	12-08-2025	OFLIN 4MG INJ	3004	1	12.72	12.72	0.00	12.72
	12-08-2025	MYO PYROLATE INJ 1S	30049099	1	127.48	127.48	0.00	127.48
	12-08-2025	PYROLATE INJ 1ML	30049099	1	15.37	15.37	0.00	15.37
	12-08-2025	HYDROCORT 100 MG INJ	3004	1	47.82	47.82	0.00	47.82
	12-08-2025	VICRYL 2-0 VP 2317	90189099	1	888.75	888.75	0.00	888.75
	12-08-2025	ETHILON SUTURE USP1 - NW3338 - ETHICON	90189099	1	362.00	362.00	0.00	362.00
	12-08-2025	MYOSTIGMINE 0.5MG INJ 1ML	3004	2	5.25	10.50	0.00	10.50
	12-08-2025	SURGICAL BLADE 15(GLASS VAN)	90189022	1	7.50	7.50	0.00	7.50
	12-08-2025	SUCTION CATHETER 16G - ROMSONS	90183990	1	89.00	89.00	0.00	89.00
	12-08-2025	ECG ELECTRODES 3M (ADULT)		5	32.34	161.70	0.00	161.70
	12-08-2025	CAUTERY TIP CLEANER	90183990	1	200.00	200.00	0.00	200.00
	12-08-2025	EXAMINATION GLOVE NITRILE - MEDIUM - ENLIVA QUI		20	20.00	400.00	0.00	400.00
	12-08-2025	CAUTERY PAD DISPOSABLE - F7820WN - FIA	9018	1	1,125.00	1,125.00	0.00	1,125.00
	12-08-2025	ENCORE MICRO OPTIC GLOVES 7.5 - ANSELL - MLP173		1	117.19	117.19	0.00	117.19
	12-08-2025	ENCORE MICRO OPTIC GLOVES 7.0 - ANSELL - MLP172		2	117.00	234.00	0.00	234.00
	12-08-2025	ENCORE MICRO OPTIC GLOVES 6.5 - ANSELL - MLP171		2	117.00	234.00	0.00	234.00
	12-08-2025	NEEDLE 24 X1.5G	90183290	2	3.60	7.20	0.00	7.20
	12-08-2025	SYRINGE 20ML LEUR LOCK - BD - MLP10011	90183100	2	79.69	159.38	0.00	159.38
	12-08-2025	SYRINGE 10ML LEUR LOCK - BD - MLP440	9018	2	44.00	88.00	0.00	88.00
	12-08-2025	SYRINGE 10ML ROMOJET - ROMSON - MLP7742		2	37.00	74.00	0.00	74.00
	12-08-2025	PLAIN SHEET LARGE D-301 120X210CM 1S	90189099	1	200.00	200.00	0.00	200.00

Apollo Spectra Hospitals: 156, Famous Cine Labs, Behind Everest Building, Tardeo, Mumbai - 400054
Ph No: 022 - 4332 4500 | www.apollospectra.com

Apollo Specialty Hospitals Pvt. Ltd. (CIN - U85100TG2009PTC099414)
(Formerly known as Nova Specialty Hospital Pvt. Ltd.)

Regd. Office: 7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Ameerpet, Hyderabad, Telangana - 500038
Ph No: 040 - 4904 7777 | www.apollohl.com



Sl.No	Date	Description of Service	SAC Code	Qty	Rate	Gross Value	Discount	Total Value
12-08-2025		DEXIT 50MCG INJ 0.5ML	3004	1	349.39	349.39	0.00	349.39
12-08-2025		ABDOMINAL SPONGES	30051090	10	35.00	350.00	0.00	350.00
12-08-2025		DC HANDRUB 500ML WITH PUMP	30049087	0.2	450.00	90.00	0.00	90.00
12-08-2025		RINGER LACTATE 500ML - B.BRAUN	30049099	1	69.38	69.38	0.00	69.38
12-08-2025		ET TUBE 7.0 MM - HELMIER	90189099	1	437.00	437.00	0.00	437.00
12-08-2025		MCT PROFOL INJ 20ML	3003	1	138.75	138.75	0.00	138.75
12-08-2025		Sevoflurane - 250ML (Abott)	0	60	32.73	1,963.80	0.00	1,963.80
12-08-2025		AARDEX 4MG/2ML INJECTION	30043913	1	10.69	10.69	0.00	10.69
12-08-2025		MIDFIX INJ 10ML	3004	0.5	61.88	30.94	0.00	30.94
12-08-2025		PIROBAC INFUSION 100ML	3004	1	680.00	680.00	0.00	680.00
12-08-2025		TRANSOFIX - 4090500 - B BRAUN	90183100	1	28.13	28.13	0.00	28.13
12-08-2025		RUFENYL (FENTANYL) 2ML INJ	3004	1	44.77	44.77	0.00	44.77
12-08-2025		OFLAN 4MG INJ	3004	3	12.72	38.16	0.00	38.16
12-08-2025		CEFBACT 1000MG INJ	3004	1	71.08	71.08	0.00	71.08
12-08-2025		DICLOKOP AQUA INJ 1ML	3004	3	23.40	70.20	0.00	70.20
12-08-2025		OMNATAX 1GM INJ 1S	30049031	3	44.94	134.82	0.00	134.82
12-08-2025		STERIPOINT DNS 5% 500ML - AMANTA	3004	1	91.36	91.36	0.00	91.36
12-08-2025		RINGER LACTATE 500ML - B.BRAUN	30049099	2	69.38	138.76	0.00	138.76
12-08-2025		ECOFILAC NS 100ML - B BRAUN	30049099	6	44.93	269.58	0.00	269.58
12-08-2025		AMOXYCLAV 1.2GM INJ	30041030	1	150.23	150.23	0.00	150.23
12-08-2025		PANTATEC 40 MG INJ	0	3	52.97	158.91	0.00	158.91
12-08-2025		EXAMINATION GLOVE NITRILE - MEDIUM - ENLIVA QUI		30	20.00	600.00	0.00	600.00
12-08-2025		IV Set Vented Make: Polymed - MLP4285	9018	2	174.38	348.76	0.00	348.76
12-08-2025		SYRINGES 50ML DISPOVAN - 1	90183100	1	61.00	61.00	0.00	61.00
12-08-2025		SYRINGE 2ML ROMOJET - ROMSON - MLP5903		5	15.28	76.40	0.00	76.40
12-08-2025		SYRINGE 10ML ROMOJET - ROMSON - MLP7742		5	37.03	185.15	0.00	185.15
12-08-2025		VEIN O LINE 10CM - ROMSON - MLP2069	90189099	1	450.00	450.00	0.00	450.00
12-08-2025		IV CANNULA 20G ROMSON - INTRAFILON - N	9018	1	184.69	184.69	0.00	184.69
12-08-2025		BUDECORT RESPULES 0.5 MG/2 ML	30049099	1	24.98	24.98	0.00	24.98
12-08-2025		WET WIPES	96190010	5	35.00	175.00	0.00	175.00
12-08-2025		NEBULIZER MASK ADULT - ROMSONS - AER	90191090	1	711.56	711.56	0.00	711.56
12-08-2025		IV 3000 MOISTURE RESPONSIVE CATHETER	30051090	1	127.05	127.05	0.00	127.05
12-09-2025		ABDOMINAL BINDER LARGE	90211000	1	970.00	970.00	0.00	970.00
Sub Total:							-	13,802.35
Bill Amount:								2,01,452.35

Summary

Bill Amount	2,01,452.35
Discount	21,452.35
Total Amount	1,80,000.00
Patient Share	1,80,000.00
Less : Paid	1,80,000.00
Patient Due	-
Net Payable	-



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