

METROPOLITAN GENERAL HOSPITAL

123 Medical Plaza, New York, NY 10001
Phone: (212) 555-0100 | Tax ID: 45-2345678

INVOICE

Invoice Number: INV-2024-12456
Invoice Date: December 20, 2024
Patient: Sarah Johnson
Patient ID: PAT-12345
Policy Number: POL-2024-445566

Service	Description	Amount (\$)
Emergency Dept.	ER Visit – High Complexity (99285)	850.00
Laboratory	CBC, BMP, Urinalysis	265.00
Radiology	Chest X-Ray & CT Abdomen	1380.00
Medications	Ceftriaxone, Morphine, Ondansetron	145.00
Supplies	IV Setup, Dressings	165.00

Total Charges: \$2,805.00
Insurance Coverage (80%): \$2,244.00
Patient Responsibility (20%): \$561.00

Payment Terms: Due within 30 days