

Fekrah Medical

Invoice Num: 4678725377

Insurance_Number: 5147171267

Created_At: 5/16/2025

Patient Name : وليد فتحى سيد

Patient Age : 25

Patient City : cairo-Faisel

Company Name : almokhtabar

Company Phone: 01111111111

Company Email : almokhtabar@gmail.com

Confirmed Code

Approval Number

5147171267

Item

final_amount

صورة دم كاملة-cbc

EGP 00.00

تحليل بول كامل - urine analysis

EGP 00.00

Total Net Amount

EGP 00.00