



مستشفى ومركز الخالدي الطبي
Al Khalidi Hospital & Medical Center

Al-Khalidi Hospital & Medical Center In - Patient Summary Invoice

Amman Jordan

INSURANCE

Patient Name:	saad ahmed	Invoice No:	IN621174437
Visit Date:	30 - 12 - 2020 13:13	Invoice Date	2021-01-06 17:44
Patient MRN:	KHMC36520131354	Visit No:	EDR365201313

Description	Service Type	Status	Original Amount	Insured Amount
Kidney	Lab	Covered	145.0000	1.4000
Test	Radiology	Not Covered	1499.0000	0

Signature & Stamp

Invoice Amount	1500.4000	JD
Down Payments	0	JD
Total	1500.4000	JD