

careVista Superspeciality Hospital



Labtest Bill

Patient ID: 4

Bill No: LB2493

Patient Name: Arohi Mitra

Billing Date: 09/03/2022

Gender / Age: Female / 21 yrs

Test Type: Diagnostic Imaging

Contact No: 0891022783

Testing Date: 03-12-2021

Address: 100, Ashoke road gangulybagan, KOLKATA

Test Name	Rate
Echocardiography (ECG)	150

Total Amount: Rs. 150

All Patient records are confidential and are revealed to the patient or his/her authorized representative only.