

Christian Medical College. VELLORE - 632 004, TAMIL NADU, INDIA.

Online Appointment

Hospital Number: 189971G Name: SUMIYA AKTER MIM

Appointment Date: Report to MRO at: 7:30 AM 08/01/2016

> PAEDIATRIC ORTHO Clinic

Location OPD BUILDING BASEMENT B 40

Doctor Name Dr.THOMAS PALOCAREN

Mode of Payment HDFC

Invoice Number: W0462054 **Amount:** Rs.175/-

Before report to Medical Record Officer Please contact IRO (622) to complete the formalities

Thanking You.

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