

INVOICE

INVOICE NUMBER

20APRIL2021_2

MEMBER NAME

FAHMA HASSAN IBRAHIM

MEMBER NUMBER

02189091-01

BENEFITS

OUT-PATIENT

UAP MEMBER NUMBER

02189091-01

INVOICE DATE 2021-04-20 00:00:00

SERVICE PROVIDER

AAR HEALTH SERVICES LTD (11026KE)

AUTHORIZATION BY

UNAUTHORIZED

REGISTRATION NO

Diagnosis

- ACUTE AND SUBACUTE ENDOCARDITIS

SI No	Description	Quantity	Unit Price	Total
5334986	POLIOVIRUS VACCINE, (ANY TYPE[S]) (OPV), LIVE, FOR ORAL USE	1	88.00	88.0
5334987	RESPIRATORY SYNCYTIAL VIRUS MONOCLONAL ANTIBODY	1	22.00	22.0
5334988	MODIFICATION OF OCULAR IMPLANT WITH PLACEMENT OR REPLACEMENT	1	78.00	78.0
5334989	CHYLMD TRACH DNA AMP PROBE	1	567.00	567.0
			COAPY	-200.00
			Net Value	555.0