

Billing Report Details

TEST001

Report Information

SID Number: TEST001
Billing Date: 20 Jun 2025
Generated: 20 Jun 2025, 07:22 PM
Status: generated

Clinic Information

Clinic: AVINI Labs Test
Site Code: TST
Contact: N/A
Email: test@avinilabs.com

Patient Information

Name: Test Patient

Patient ID: P001

Date of Birth: 20 Jun 1993

Email: test@example.com

Age/Gender: 30 / Male

Blood Group: O+

Mobile: 9876543210

Billing Information

Invoice Number: INV-2025-001

Referring Doctor: Dr. Test Doctor

Payment Status: Paid

Payment Method: Cash

Test Details (2 tests)

Complete Blood Count CBC		#T001
<div><div>HMS Code</div><div>H001</div></div> <div><div>Instructions</div><div>Fasting not required</div></div> <div><div>Reference Range</div><div>4.5-11.0 x10³/uL</div></div>		<div><div>Department</div><div></div></div> <div><div>Specimen</div><div>Blood</div></div>
Price 250.00	Qty 1	Amount 250.00

<div>■ Lipid Profile</div> <div>LIPID</div>		#T002
<div>■ HMS Code</div> <div>B002</div>		<div>■ Department</div>
<div>■ Instructions</div> <div>12 hours fasting required</div>		
<div>■ Reference Range</div> <div>Total Cholesterol: <200 mg/dL</div>		<div>■ Specimen</div> <div>Serum</div>
<div>Price</div> <div>■400.00</div>	<div>Qty</div> <div>1</div>	<div>Amount</div> <div>■400.00</div>

■■ **Unmatched Tests (2)**

- Unknown Test 1
- Unknown Test 2

■ **Financial Summary**

Bill Amount: ■650.00	GST (18%): ■105.30
Other Charges: ■0.00	Total Amount: ■690.30
Discount (10%): ■65.00	Paid Amount: ■690.30
Subtotal: ■585.00	Balance: ■0.00

Report Metadata

Test Match Rate: 100%	Matched Tests: 1
Total Tests: 1	Unmatched Tests: 0