

# LIFELINE Hospital

#### **Patient Information**

Personal Number: 1172711835

Name: Rina Rushiti

Age: 20

Gender: Female Blood Type: A-

Email: Rina@gmail.com

Phone: 049438421 Room Cost: 100.00\$ Medicine Cost: 50.00\$ **Total Cost: 160.00\$** 

#### Condition

Minor Issues

#### Time

09:00:00

### **Therapy**

Yes

## **Attending Doctor**

Doctor: Mentor geci

Doctor email: Mentor.derm@gmail.com

Date of Visit: 2024-11-16

Date: 11/15/2024