

# LIFELINE Hospital

### **Patient Information**

Personal Number: 1172711835

Name: Rina Rushiti

Age: 21

Gender: Other

Blood Type: AB-

Email: Rina@gmail.com

Phone: 049438421

Room Cost: 200.00\$

Medicine Cost: 28.00\$

**Total Cost: 238.00\$** 

#### Condition

**Serious Condition** 

#### **Time**

08:30:00

## **Therapy**

No

## **Attending Doctor**

Doctor: Mentor Geci

Doctor email: Mentor.neu@gmail.com

Date of Visit: 2024-11-30

Date: 11/28/2024