



Sparta Hospital Management System

Hig-67, 1st Floor,
Phase 3, KPHB Colony,
Hyderabad-72.

RADIOLOGY DETAILS

Patient Name	: Mrs. Lakshmi OP	Age / Gender	: 30Y/Female
MR No	: MR390006043	Reg No	: OP390007543
Mobile	: 6301483768	Invoice	: OPRInv39-202011171151
Doctor	: Dr. B KALYANI M.B.B.S Physician	Date	: 17-11-2020

<u>S.No</u>	<u>Test Name</u>	<u>Cost (Rs)</u>
1	X-RAY DORSAL SPINE AP / LAT VIEW	500

<u>Payment Details</u>			
Total (Rs)	: 500		
Sub Total (Rs)	: 500	Paid Amount (Rs)	: 350
Due Amount (Rs)	: 150	Pay Mode	: Cash
Payment Status	: Pending		

Total Amount (Rs) : 350

Amount in words : THREE HUNDRED FIFTY RUPEES ONLY

Authorized Signature

Bill created by: Testhospital1Admin
Bill created at: 17-11-2020 02:32 PM
Printed By : Testhospital1 Admin