## Islamabad Medical Hospital

## MEDICAL BILL RECEIPT

Receipt Number: 453456 Bill Date: 30/11/2023

Name of Doctor: \_\_\_\_ Dr. Freed Ullah Khan \_\_\_ CCU Bad No: 05

Name of Patient: Said Hussain Sex: Male

Department: \_\_\_\_ Cardiology \_\_\_ Diagnosis: Cardiothoracic Surgery

Code	Description of Services/Medicine/Products	Rate	Line Total
01	CONSULTATION CHARGES (PER DAY)	10,000	100,000
02	(CCU) BAD CHARGES (10 DAYS)	75,000	7,50,000
03	NURSING CHARGES	8,000	80,000
04	BLOOD TRANSFUSION ADMINISTRATION CHARGES	8,000	24,000
05	SURGERY / PROCED <mark>URE CHARG</mark> ES		100,000
06	ANESTHESIA		50,000
07	SURGEON CHARGES		200,000
08	OT CHARGES	ST.	70,000
09	LABORATORY CHARGES		150,000
10	PHARMACY, MADICINE AND SURGICAL		150,000

Total: PKR **1,674,000** 

Payment Method: Cash Amount Status: PAID

Land Line: 051-2325022 Address: G9-1 Islamabad