

### Patient Details

Name: Shivendra jha

Age: 25

Gender: Male

Email: jhashivendra24@gmail.com

### Doctor Details

Name: Dr. Shivendra jha

Specialization: physican

Contact: 0780838444

### Appointment Details

Date: 3/4/2025, 12:20:00 pm

Symptoms: drxcfgvb

Status: booked

### Payment Details

Consultation Fee: 11000

Total Fee: 11200

Payment Status: paid

Transaction ID: pay\_QDmHhZfuR2h7eR

Paid At: 1/4/2025, 5:02:10 pm

Note: We will inform you when the doctor accepts or rejects your appointment.



