



Haider Medical Store & Cosmetics

Shop # 1, St # 5, Opposite Zaib Plaza, Fauji Colony,
Rawalpindi. 0300-5141939

No. 296

Date: 7/11/2014

Name MASAD ALISAM

S. No.	DESCRIPTION	Qty	Rate	Amount
1	Pop Bandage 311	3	150	450/=
2	Grpfe Band 311	3	150	450/=
3	Ankle Foot Orthosis aight splint	1	750	750/=
4	Mylar	15	294	4410/=
5	Prasec N fast	45	19	855/=
6	Bengin DS	45	22.8	1026/=
7	Pite -D	1	2700	2700/=
8	Concergue -D10	1	3400	3400/=
TOTAL				20791/=



/

Signature

CHD



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سٹی لیب



مقامی نصف ایمان ہے ایچ ماحول کوصاف سہارا رکھیں

046

LAB NO.: 130

Date 07/11/24

PATIENT NAME: MAQAR

AGE/SEX 38-M

REF. BY DR. 0312-5000144,

DR-SOHAIL SB.

Rs.

CP-ESR.

Rs. 1500/-

X-RAY Elbow joint (L)

Rs. 1500/-

X-RAY SHOULDER (L)

Rs. 1500/-

X-RAY Foot (R)

Rs. 1500/-

X-RAY KNEE JOINT (R)

Rs. 1000/-

VIT-D

Rs. 3700/-

TOTAL

Rs. 10700/-

Received with thanks from Mr/Mrs/Miss
of..... a sum Rupees.....
on account of above mentioned tests

RAWALPINDI: Kashmir Gate Plaza, Opposite B.H, Murree Road

Tel: 92 51 4847390-92, Fax: +92 51 4907069, Cell: +92 334 0457457, +92 334 1457457

ISLAMABAD: Al-Khair Plaza (Megas Plaza) Fazaal-ul-Haq Road, Blue Area.

Tel: +92 51 2348498-99, 92 51 2804073, Fax: 92 51 2804074, Cell: +92 332 2277584

Web: www.citilab.com.pk Email: info@citilab.com.pk

Bone Care Center

23-E, Saidpur Road, Rawalpindi. Ph: 051-4417757

X-Ray Slip

948

Sr. # _____

Date 06/11/2024

Patient Name UMAR ALI AKRAM Contact No. 0312-5000144

Referred By Dr. Sohail Iqbal Age 38y Sex male

X-Ray View Elbow^(L), Shoulder (L) Foot (R) AP/LT/ST/other _____
Knee Joint (R)

Amount 6000/- (Six thousand only)

4000/- Consultation & procedure.

Total 10000/-

Signature Dr. Sohail Iqbal Sheikh
Consultant
Orthopaedic Surgeon

