

LABORATORY REPORT

Printed On : 2024-12-22 04:00 PM

Patient Name :	Sex :	Years
ID Number :	Age :	
Patient No :	Lab No :	
Doctor :	Request Date :	
Result By :		

Test	Reading	Result	Units	Normal Range	Ref Text
------	---------	--------	-------	--------------	----------

Doctor Notes:

Entered Time:

Confirmation Time:

Doctor Lab

Signature

Technician .....