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AI Report

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NAME : {name}	DATE : {examination_date}
SEX : {sex}	AGE: {age}
REF. BY: {refby}	UHID NO: {uhidno}

Examination:

Examination Type : {examination_type}

Examined Area : {examined_area}

Device Model : {device_model}

Findings:

{imaging_findings}

Diagnosis:

{diagnosis_summary}

Comments:

• {Comment}

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