



**Lab Name:** ibn sina

**location:** 36.327039,6.575282

**Tel.:** 0561731860

**Email:**  
zizou.b200320015@gmail.com

**Patient Information**

ID : 1000003

DOB : April 30, 2001

AGE : 22

GENDRE : Male

Email :  
ziz.oub200320015@gmail.com

**Report ID:**

**10010120230609021205**

Appointment Date: June 10, 2023

Appointment Time: 10 a.m.

Received : June 9, 2023

---

**Test Results:** Coagulation Panel

Code	TESTS	Result	UNITS	REFERENCE INTERVALE	LAB
BCP	Prothrombin Time (PT)	1	seconds		100101
BCP	Activated Partial Thromboplastin Time (aPTT)	1	seconds		100101
BCP	International Normalized Ratio (INR)	1	seconds		100101

---

**PREDECTION:**

None

---

**Additional Notes or Comments**

Please note that this is a confidential report. If you have any questions or concerns about the results, please contact us.

medicine chef signature :

