



# Medicare Clinic

Address: 123 Street, City, Country

Phone: +1234567890 | Email: info@example.com

## Lab Test Report

**Patient Name:** Patient1

**Test Title:** lab again again

**Date Created:** Feb. 17, 2024

Test Panel	Result	Flag	Reference Value
kretinine	87	Critical	45
Bilirubin	36	Medium	34

**Notes:**

Test Test

**Requested By:** Admin