

# Oral Cancer Risk Index (OCRI) Test Report

## Clinical Information

## [1] "NA"

Name: jjj Sex: o Age: 8 Tel: 000-000-0000 Address: 111 ABC St. City ST 00000 Sample No: 0011 Sampling date: 00/00/0000 Sampling hospital:Some Hospital Sampling physician: Dr. A B OCRI test date: 00/00/0000