# MALOLO HOSPITAL

## P.O.Box 81 TABORA

Patient Name: Saida M Kopwe Authorization Number: 520128605844

Patient ID: 129094 Visit No: 40186 Card No: 101102179377

#### **Patient Case Notes**

#### head ache and vomitting

head ache and vomitting

### **Clinical Radiology Summary**

Date	requested test	Clinical Information	Findings	Doctor
11/02/2021	CT Scan Abdomen	head ache and	please check the	Israel
	+Pelvic	vomitting	dicom image	

### **Clinical Laboratory Result**

Parameter	Normal Range	Msr Unit	Results
B/S for MPS			nad
MRDT			positve