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<input type="checkbox"/>	Patient Name	MRN	Accession #	Study Date	Modality
<input type="checkbox"/>	CERBERIX	uzgcud	3423	Jul 20 2007	CT
<input type="checkbox"/>	CERBERIX	uzgcud	3423	Jul 28 2007	MR
<input type="checkbox"/>	ENTERIX	foidhh	92485743	Oct 19 2010	PT/SC
<input type="checkbox"/>	MACOESSIX ☆	UGVdzg3	987645	Sep 19 1999	PT/SC
<input type="checkbox"/>	MANIX	h4873g	0	Nov 1 2003	CT
<input type="checkbox"/>	PHENIX	P-000002	A389274983	Mar 21 1996	CT
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Name	Study #	Modalities	User#	Messages #	Date	Last event
Album 1	15	CT/MR	5	131	11/12/2017	12/04/2018
Album 2	3	CT/MR/PT	9	18	11/12/2015	12/08/2018
Album 3	27	PT/MR	10	8	11/12/2016	12/05/2018
Album 4	43	CT	5	78	11/12/2017	12/10/2018




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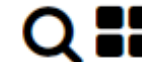

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