



BIOSCOPIC DIAGNOSTIC LABORATORY DOH ACCREDITED

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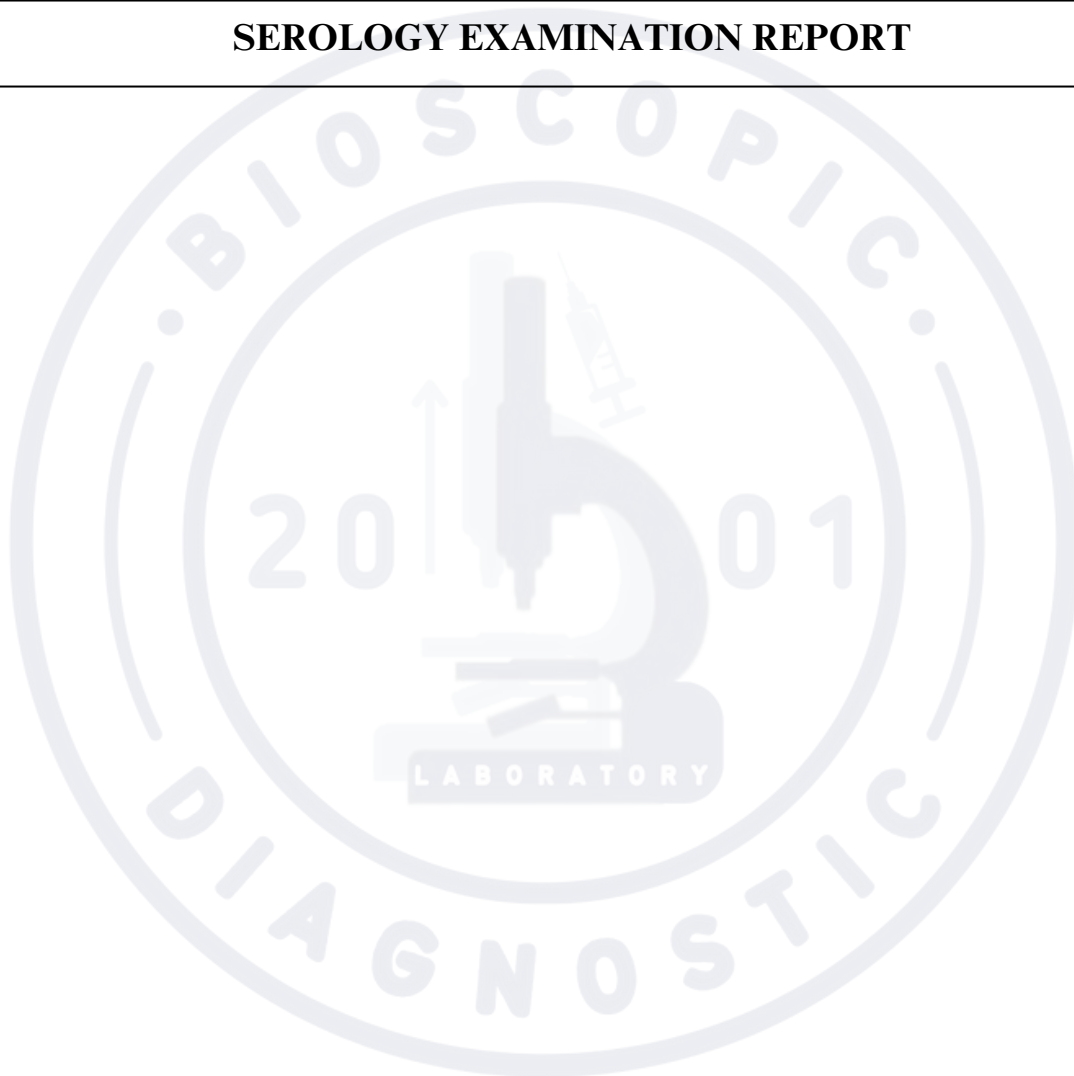
Name:

Date:

Age/Sex:

Physician:

SEROLOGY EXAMINATION REPORT



END OF REPORT

JOHN ERIK BUENCAMINO, RMT. _____

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Medical Technologist

Medical Technologist

MARLENE S. ONTOG MD, _____

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