

## VIRAL LOAD TEST RESULT

**SPECIMEN ID** 

**SPECIMEN COLLECTION DATE** 

ART (e-TRACKER) NO.

WE200203244

03-Feb-2020 00:00:00

2510-0310-012/A05127

**PATIENT FIRST NAME** 

**PATIENT LAST NAME** 

MOBILE NO.

Comfort

Konadu

0243770537

**AGE** 

**GENDER** 

39

Female

**ART CENTER CODE** 

**REGION** 

**DISTRICT** 

232

Western

SEKONDI TAKORADI

ART CENTER NAME Effia Nkwanta Regional Hospital **CLINICIAN NAME** Phyllis Tachie-Menson

**UNIQUE IDENTIFIER** 

**TESTING LAB** 

Sekondi Public Health Laboratory

SPECIMEN RECEIPT DATE

**SPECIMEN TEST DATE** 

**SPECIMEN TYPE** 

**PLATFORM** 

03-Feb-2020 00:00:00

03-Feb-2020 00:00:00

Whole Blood

Roche

VIRAL LOAD RESULT (copies/ml) : **Below Detection Level** 

VERIFIED BY: Sylvester Chinbuah

**PREVIOUS RESULTS** 

Date of Last Viral Load Test:

Result of previous viral load(copies/ml):

⊕ = VL < = 1000 copies/ml: Continue on current regimen

(E) = VL > 1000 copies/ml: copies/ml: Clinical and counselling action required

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