

CURA HEALTH EMR

Prescription #: RX-IMG1762023770027I10ORDERORDER



Clinical Care Hospital

house 33
+923213213213
averox71@gmail.com
website: www.clinicalcare.com

Name: John Patient

Address: [object Object]

Gender: N/A

Weight: -

DOB: 11/2/2025

Age: 0

Sex: No: N/A

Date: 02 Nov 2025

Provider: N/A

IMAGING STUDY DETAILS

Study Type: X-ray (Radiography)
Modality: X-Ray
Body Part: Abdomen X-Ray
Image ID: IMG1762023770027I10ORDER
Status: ORDERED

Resident Physician
(Signature)