

CURA HEALTH EMR

Prescription #: RX-IMG1761930155088I8ORDERORDER



Clinical Care Hospital

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Name: Robert Davis

Address: [object Object]

Gender: N/A

Weight: -

DOB: 7/22/1970

Age: 55

Sex: No: 234 567 8901

Date: 31 Oct 2025

Provider: N/A

IMAGING STUDY DETAILS

Study Type: X-ray (Radiography)
Modality: X-Ray
Body Part: Abdomen X-Ray
Image ID: IMG1761930155088I8ORDER
Status: ORDERED

Resident Physician
(Signature)