

CURA HEALTH EMR

Prescription #: RX-IMG1761916610571I8ORDERORDER



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: IMG1761916610571I8ORDER  
Status: ORDERED

Resident Physician  
(Signature)

May Bubushia