

**CURA HEALTH EMR**

Prescription #: RX-IMG1761931966881I8ORDERORDER

**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: 08 Nov 2025

Provider: N/A

**IMAGING STUDY DETAILS**

Study Type: CT (Computed Tomography)

Modality: X-Ray

Body Part: Abdomen X-Ray

Image ID: IMG1761931966881I8ORDER

Status: ORDERED

Resident Physician  
(Signature)