

Syrian Arab Republic  
Ministry of Health  
Damascus Hospital  
Department of Chest Radiology

**MEDICAL REPORT**

**Patient Name: {**name**}**

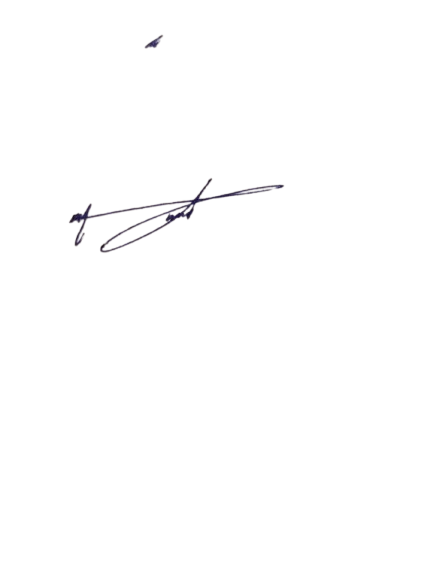
**Patient Age : {**age**}**

**Doctor Name: {**doctor**}**

**Report Date: {**date**}**

**Detailed Report:**

{report}

 **May you always be well and in good health**