**NATIONAL INSTITUTES OF HEALTH**

**MOLECULAR LABORATORY**

University of the Philippines Manila

R E S U L T F O R M

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Sample Run Date: | | «Date\_of\_Analysis» | | Released on: | | «Date\_of\_Release» | |
|  | | |  |  | |  | |
| Patient Name: | «Surname», «First\_Name» «MI». | | | | | | |
| Age/Sex: | «Age» / «Sex» | | | | Date of Birth: | | «Birth\_Date» |
| Sending Hospital: | «Hospital» | | | | Sample Type: | | «Sample» |
|  | | |  |  | |  | |
| Molecular Diagnostic Test | | | | | | | |
| SARS-CoV-2 (Causative agent of COVID-19)  Polymerase Chain Reaction | | | | | | | |
| Sample ID | | | Date of Sample Collection | Findings | | | |
| «Sample\_ID» | | | «Date\_Collected» | «RESULT» | | | |
| Sample Receipt Date |
| «Date\_Received» |
|  | | |  |  | |  | |
|  | | |  |  | |  | |
| **INTERPRETATION:** «Interpretation» | | | | | | | |
|  | | |  |  | |  | |
| NOTE: *Correlation with pertinent patient history, clinical data and epidemiological information by a healthcare professional is recommended.*  ADDITIONAL COMMENTS: «Comments» | | | | | | | |
| PERFORMED BY: | | | | VERIFIED BY: | | | |
|  | | | |  | | | |
| «PreAnalytical\_MT1»  «PreAnalytical\_MT1\_PRC»  Medical Technologist (Pre-Analytical) | | | | «Supervising\_MT»  «Supervising\_MT\_PRC»  Supervising Medical Technologist | | | |
|  | | | |  | | | |
|  | | | |  | | | |
| «PCR\_MT»  «PCR\_MT\_PRC» | | | | «QA\_Officer»  Quality Assurance Officer | | | |
| Medical Technologist (PCR) | | | |  | | | |
|  | | | |  | | | |
|  | | | |  | | | |
| «PCR\_Mol\_Bio»  Molecular Biologist | | | | KAREN CYBELLE J. SOTALBO, MD, DPSP  PRC Lic. No. 121483  Pathologist | | | |
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