

**GILEAD MEDICAL AND DENTAL CENTRE LABORATORY**  
**MEDICAL SCREENING REPORT**

Patient Name: ASIWOR BENDELWOR

Operator:

Sample ID:

Age:

Gender: M

Running Date: 29/12/2017

Blood Type: Standard

---

**FAECAL OCCULT BLOOD(FOB)**

METHOD: IMMUNODIFFUSION

**TEST**

**RESULT**

**FOB**

**NON REACTIVE**

**Signed by BIOMEDICAL SCIENTIST**