

UNILORIN MEDICAL SCREENING CENTER  
**UNIVERSITY OF ILORIN**



Mailing Address

Unilorin Medical Screening Center  
Beside Unilorin Health Service Clinic

P.M.B 1515, Ilorin

Telephone : 07048121720

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Patient Name:	Aderoju, Kayode Oluwaseun	Sex:	Male	Date of Birth:	1976-11-10
LAB ID Number:	23/UIIL/ML/0001	Telephone:		Age:	46 Years 6 Months 5 Days
Referred By:				Customer Email:	

Requisition Number:		Order Reference Collection Date :	May 15, 2023	Request Date:	May 15, 2023
Report Date:	May 16, 2023	Report Type:	Final	Report Priority:	
Specimen Type Comment:		Diagnosis:		Tests Requested:	Renal Function Test

**ALBUMIN + PROTEIN - Result**

S/N	NAME	RESULT	RANGE	UNIT	COMMENT
1	Total Protein	12		g/L	
2	ALK PHOS	50	40 - 120	μ/L	
3	GGT	24	5 - 40	μ/L	

**Pathologist comment :**

Signature :

Date :

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