REPORT ID: ZI19K2SDLHTGIIT4

Covid 19 Report

— Personal Information ————		
Name of Patient	Date of Birth	Gender
fadi	01 / 01 / 1980	Male
Email		Blood Group
alturjman@outlook.com		A-
— Test Information		
Reason for Testing	Date of Test	Type of Test
fff	17 / 05 / 2023	fff
Symptoms		
fff		
— Result Information —		
ffff		
Doctor Remarks and Comments		
fffff		
Doctor Name	Doctor Email	
Ibrahim Ame	ame.ibrahim@yahoo.d	com

GENERATED DATE: 18 / 05 / 2023