REPORT ID: 2XUGSU5D9LI23MMK0

Covid 19 Report

Name of Patient fadi	Date of Birth 01 / 01 / 1980	Gender Male
Email alturjman@outlook.com		Blood Group A-
— Test Information ————————————————————————————————————		
Reason for Testing Travelling	Date of Test 18 / 05 / 2023	Type of Test PCR
Symptoms None		
— Result Information		
Results None		
Doctor Remarks and Comments None		