

 ጤና ሚኒስቴር - ኢትዮጵያ MINISTRY OF HEALTH-ETHIOPIA የዚያ ሚኒስቴር ስልክ	Ethiopian Public Health Institute SARS-COV-2 Lab Result Reporting Form	
	Addis Ababa, Ethiopia Tel. +251-112133499/ +251-112751522 P.O.Box: 1242/5654 Email: covid19testingreport@gmail.com or ephi@ethionet.et	

Client Information

Full Name: CHALA JEMAL KEDIR **Sex:** Female
Age in year: 29 **Passport Number:** EP5505307
Nationality: Ethiopian **Region:** A.A
Phone number: 0924883118
Residence city/town: GOJAM BERENDA

Specimen Information

Specimen Id: 21078360567 **Specimen Type:** Nasopharyngeal & Oropharyngeal Swab
Date of Specimen Collection: 2021-09-19 **Time of Specimen Collection:** 11:00:00
Site of Specimen Collection: ZAK INTERNAL MEDICINE SPECIALITY CLINIC **Specimen Quality:** Accepted
Requested By: Self Request
Sample collected by: kasim temam

Test Result

Requested Test: SARS-COV-2 **Test protocol/SOP No and Title:** SARS-COV-2 Testing
Test Method: RT-PCR
RT-PCR test: Positive
Date Result Issued: 2021-09-19 **Time Result Issued:** 16:00:00
Test Done by: Naol Kelbesa **Result Reviewed by:** Mengistu Yemer
Testing Laboratory: ZAK INTERNAL MEDICINE SPECIALITY CLINIC
Report Authorized and Issued by: Dr zakaria abdulhamid



Signature

Date: 2021-09-19



A "Positive" Result does exclude infection with the reported pathogen

