



Lu Clinic and Hospital
National Highway, Tacurong City
Sultan Kudarat 9800
(064) 447-0427 | 0933-813-1697

Name: _____

Date: _____

Age and gender: _____

REQUEST FORM

HEMATOLOGY	URINE/STOOL STUDIES	CHEMISTRY	GLUCOSE STUDIES
	CARDIAC STUDIES		
X-RAY			
ULTRASOUND			
OTHERS			

INSTRUCTIONS

PRC No: _____

PTR No: _____



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R_x

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