



### Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No/UHID
MaxID/Lab ID	Collection Date/Time
Ref Doctor	Reporting Date/Time

#### Serology



SIN No: B2B2676818

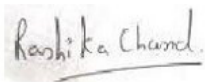
Test Name	Result	Unit	Bio Ref Interval
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#### Rapid Card test - Dengue Serology (IgM & Ig G)\*

Antibody IgM Immunochromatography	Not Detected
Antibody IgG Immunochromatography	Not Detected

Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*



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