



**VISITOR PASS**

|                     |                          |                     |             |
|---------------------|--------------------------|---------------------|-------------|
| <b>Patient Name</b> | : adasdasd               | <b>Visitor Name</b> | :aaa        |
| <b>Ward</b>         | :                        | <b>Relation</b>     | :Sister     |
| <b>Admitted on</b>  | : 03/04/2024 04:05:08 PM | <b>Phone</b>        | :9874561235 |
| <b>Bed No.</b>      | :                        | <b>Status</b>       | :Pending    |

(Incharge)

None

Apolo Hospital



**IMPORTANT INSTRUCTIONS**

Test results released pertain to the specimen submitted. All test results are dependent on the quality of the sample received by the Laboratory. Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the Referring Physician Report delivery may be delayed due to unforeseen circumstances. Inconvenience is regretted. Certain tests may require further testing at additional cost for derivation of exact value. Kindly submit request within 72 hours post reporting.

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