



GOMED DIAGNOSTICS, ABUJA

LABORATORY REPORT FORM - TEST RESULT TEMPLATE

Requisition Number	Report Date
0b9555bb19E41EE1EDB	19/05/2026 21:29:45

Doctor SELF REFERRAL

Patient Information

Patient Bola2
Email labtracadiagnostics+5@gmail.com
Age 8 years
Gender MALE
Phone No 08066554433
Address house 42, 6921 gwarinpa
Specimen Type blood
Clinical Data health

Date Entered 19/05/2026 21:29:45
Date Printed 19/05/2026 21:29:45
Collection Date 19/05/2026 21:29:45

Thank you for your request. We are reporting the following results:

Name	Result	References
HIV	Positive	33
HBV	Positive	33

Thank you for choosing Labtraca. If you have any questions or comments, please email help@labtraca.com or call +234(0)8133896015

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RC Number: 489766