



GOMED DIAGNOSTICS, ABUJA

LABORATORY REPORT FORM - TEST RESULT TEMPLATE

Requisition Number	Report Date
96956ed919E3196B727	16/05/2026 17:20:21

Doctor SELF REFERRAL

Date Entered 16/05/2026 17:20:21
Date Printed 16/05/2026 17:20:21
Collection Date 16/05/2026 17:20:21

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

Patient Information	
Patient	Bola 2
Email	
Age	9 years
Gender	Male
Phone No	
Address	F5 69 Rd, Gwarinpa Estate, Abuja 900108, Federal Capital Territory, Nigeria
Specimen Type	33
Clinical Data	33

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