

# LANCET LABORATORIES

## PATHOLOGY RESULT

Key to Diagnostic Excellence

FINAL

PATIENT NAME : NTOMBIZODWA DLAMINI  
LAB REF NO. : 481557663  
AGE/SEX/D.O.B : 80 / F / 19400406  
ID NUM. : 4004060295084  
CONTACT NUM/S : (H) 011 736-4787(C) 073 718-0401  
EMAIL :

LAB NAME : N17 LAB  
DR. REF NO. : 91 MEHLOMAKHULU STR  
SPEC NO. : 0323:HI00531L  
COLLECTION DATE : 23/03/21 1401  
RECEIVE DATE : 23/03/21 1413  
REPORT DATE : 23/03/21 1604

REPORT FOR DOCTOR  
PROTEUS LABORATORIES  
BOPHELONG MEDICAL CENTRE  
NGUNGUNYANE STREET  
KWATHEMA SPRINGS

OTHER DOCTORS  
SUBMIT DR: DR NOMA C MATSILIZA (ARWYP)  
1575

GUARANTOR INFORMATION  
NAME : MR M DLAMINI  
CONTACT NO.: (H) 011 736-4787  
EMAIL : NOT AVAILABLE  
MEDAID : DISCOV 103144410

REQUESTED : PI/INR DOSAGE

No sample time stated. Time record is the time lab received

| Test                 | Result | Reference     |
|----------------------|--------|---------------|
| > THERAPEUTIC DOSE   | .      |               |
| > INT.NORM.RAT.(INR) | 2.36   | H 1.00 - 1.25 |

For consultation by referring doctors only, please call:

Dr C. de Bruyn+2711 358 0800 | Dr Y. Pillay+2711 358 0800 | Dr N. Holland+2711 358 0800 | DR K. Mannaru+2711 358 0800