

FAX

Recipient name :

White Label Testing Org

Sender name :

WCR Advantage

Subject :

| Patient Information

Patient Name

zewa prodthermometer

Date of Birth

2000-01-01

| Metric

Date & Time

2025-09-23 02:30:09

Test Type

INR

Result

0.2 INR

| Metric

Date & Time

2025-09-23 02:30:09

Test Type

Prothrombin Time

Result

3 s