

FAX

Recipient name :

White Label Testing Org

Sender name :

WCR Advantage

Subject :

Patient Information

Patient Name	1212(33) 1212(33)
Date of Birth	2000-01-01

Metric

Date & Time	2025-12-03 13:34:59
Test Type	INR
Result	0.2 INR

Metric

Date & Time	2025-12-03 13:34:59
Test Type	Prothrombin Time
Result	3.2 s