

FAX

Recipient name :
White Label Testing Org

Sender name :
WCR Advantage

Subject :

Patient Information

Patient Name

Feb3 INRPT

Date of Birth

2000-01-01

Metric

Date & Time

2025-12-04 13:26:06

Test Type

INR

Result

0.8 INR

Metric

Date & Time

2025-12-04 13:26:06

Test Type

Prothrombin Time

Result

9.6 s