

Visit ID

: YOD100544

XXXXXX

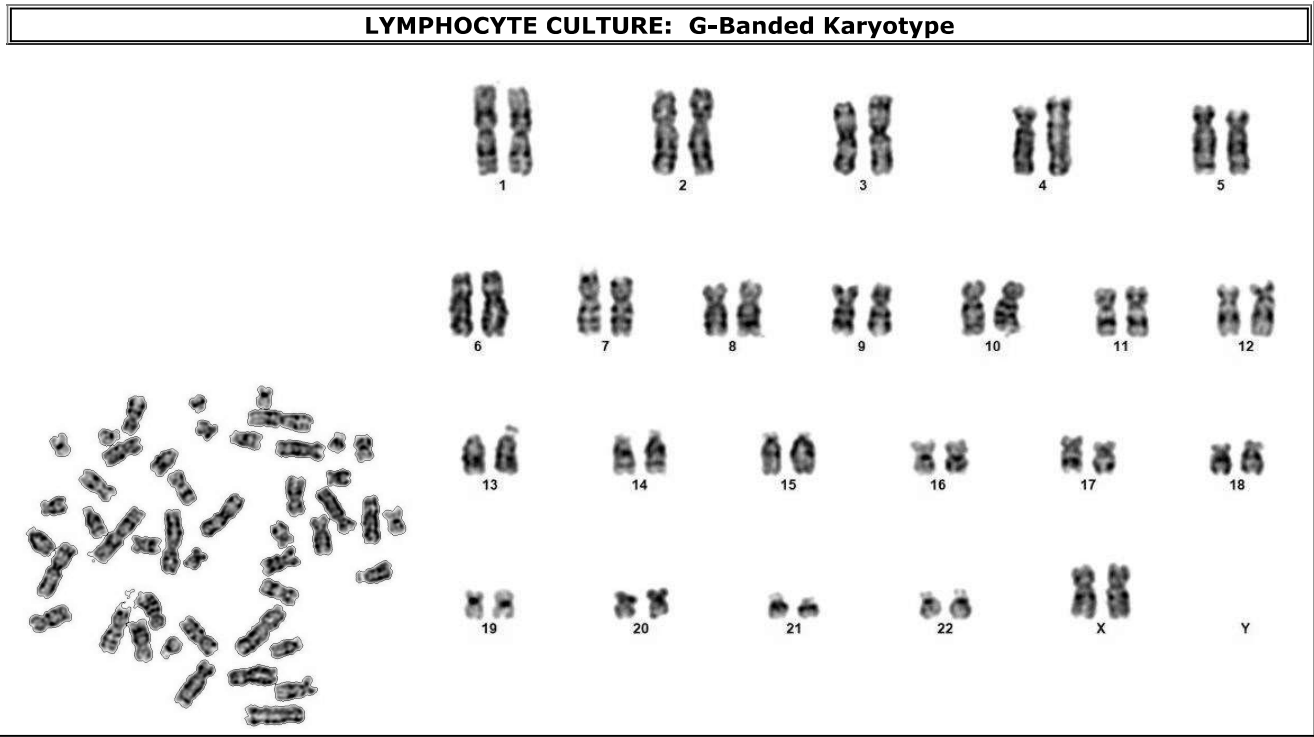
XXXXXX

Patient Name

: Ms. KALPANA

Age/Gender

: 18 Y 0 M 0 D /F



*** End Of Report ***