



TEST REQUISITION FORM (TRF)



Patient Details (PLEASE FILL IN CAPITAL LETTERS ONLY):

Name : MRS. Anshita Gupta

Age : 29 Yrs : Months Days

Sex : Male ☐ Female ☒ Date of Birth : ☐☐ ☐☐ ☐☐☐☐

Ph :

Client Details :

SPP Code PC002

Customer Name

Customer Contact No

Ref Doctor Name DR. Ashu Singh

Ref Doctor Contact No

Specimen Details:

Sample Collection date :	Specimen Temperature :	Sent	Frozen (<-20°C) ☐	Refrigerator (2-8°C) ☐	Ambient (18-22°C) ☐
Sample Collection Time : <u> </u> AM / PM		Received	Frozen (<-20°C) ☐	Refrigerator (2-8°C) ☐	Ambient (18-22°C) ☐

Test Name / Test Code

Sample Type

SPL Barcode No

Dual marker

Emp - 22/09/23 DOB - 03/08/1994

height 5'2"

weight - 65 kg

Serum

Clinical History:

No. of Samples Received:

Received by:

Note: Attach duly filled respective forms viz. Maternal Screening form (for Dual, Triple & Quad markers), HIV consent form, Karyotyping History form, IHC form, HLA Typing form along with TRF.

WOMEN'S HEALTH CENTRE

Atue

Dr. Mrs. Abha Singh

M.S., FICS (India), FICOG

- Ex Professor, Dept of Obst & Gyne
- Ex Dean, J.N.M. Medical College, Raipur
- Reg No 5881



डॉ. श्रीमती आभा सिंह

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- पूर्व प्रोफेसर स्त्री रोग विभाग,
- पूर्व डीन पं. जवाहर लाल नेहरू मेडिकल कालेज, रायपुर (छ.ग.)

Booked at Pahlajani Hoep.

5 मील श्री विहार, रायपुर - 492006 (छ.ग.), मो 7722947901 E-mail asingh7612@gmail.com

कृपया What's App पर दवाई न पूछें, Appointment वालों को ही देखा जायेगा। नहीं आने पर कृपया सूचित करें।

ame Anshita Gupta मोबाईल नं 9337424043 Age 29y Date: 16.11.23

M.L. 4 yrs.

MP:- 22nd Sept

Regular.

EDD - 29th June 24

65.3

102/60

97/m.

Adv:- ANC profile
TSH.

USG - for fetal
well being.

16.11.23 - 7 weeks 6d.

15.12.23

65 kg

112/78

P- 86/m.

P/A Sgt.

Adv.

Dual Marker

NT Scan.

Rx Continue Duphalac

- Tab Faa-20 1 daily

- Tab Calcimax 500 1 daily
x 30 days

- Tab Doxinate 1 daily
x 30 days

- Tab Kenvol - steam
inhalation. (10)

- Syp Duphalac $\frac{vv}{vv}$

after lunch & dinner
for 3-4 days.

Then only at night

- T. 2ofer MD 4 mg
below tongue.

(2 times daily) x 30 days

- T. Folineo XT 1 daily
x 30 days

Visit के 10 दिन तक पुनः फीस नहीं ली जायेगी

(10) - (Susten 200 1BD) A