

Dengue Specimen Referral Form

MolQ Laboratory

28-29, Electronic City, Sector 18(P), Gurgaon, Haryana-122015

Landline: 0124-4307906, Mobile: +91 9999778778

S. No. Patient Details

- 1 Name of the patient: Ankit Yadav
- 2 Date of Birth (Age in years): 02-02-1994
- 3 Gender: M M/ F
- 4 Contact Number: 9005908404
- 5 Address: S27/3, DLF Phase 3, Gurgaon, 122002
- 6 District: Gurgaon
- 7 Father/ Husband/ Guardian name: Khem Chand Yadav
- 8 Symptoms: Fever and Weakness
- 9 Date of Sample Collection: 18-08-2022
- 10 Date of onset of symptoms: 15-08-2022
- 11 Date of Hospital Admission (If any): NA
- 12 Name of the Hospital where admitted: NA
- 13 Date of Discharge from Hospital: NA
- 14 Present Status of the Patient: Stable

Patient Undertaking for Dengue NS1 ELISA/ IgM test at MolQ Laboratory Gurgaon

I, (Name).....Ankit Yadav.....(Age).....28.....hereby declare that I am solely responsible for the correctness of the above provided information and agree to bear any consequences thereof.

Patient Signature:

A handwritten signature in black ink that reads 'Ankit'.

Date: 18-08-2022