

**Patient Name :** Demo Patient Name  
**Age / Sex :** 45 Y / F  
**Referred By :** DEMO HOSPITAL  
**Centre :** HOD Head Office

**Lab No :** Demo Visit No  
**Registration On :** 21-Jan-25 12:47  
**Patient ID :** UHID.DEMO.001

| Urea                       |        |                               |                              | Serum Sample                 |
|----------------------------|--------|-------------------------------|------------------------------|------------------------------|
| Accession No: DEMO_BARCODE |        | Collected On: 21-Jan-25 12:47 | Received On: 21-Jan-25 17:07 | Approved On: 21-Jan-25 18:04 |
| Observation                | Result | Unit                          | Biological Ref. Interval     | Method                       |
| Blood Urea                 | 20     | mg/dL                         | 15-36                        | Urease, Colorimetric         |
| Blood Urea Nitrogen        | 9.35   | mg/dL                         | 7 - 17                       | Calculated                   |

Sample Type: Serum

Remarks: Please correlate results clinically.



This is a Demo Signature  
and the doctor's signature should appear here

In case of any unexpected or alarming results, please contact us immediately for re-confirmation, clarifications, and rectifications, if needed.

