**PROCESSED AT :**
**Thyrocare**

Thyrocare
Tests you can trust

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*9 out of 10 Doctors Trust that Thyrocare Reports are **Accurate & Reliable***

**NAME** : XXXXXXXXXXXXXXXXXXXXXXX
**HOME COLLECTION :**
**REF. BY** : XXXXXXXXXXXXXXXXXXXXXXX
**TEST ASKED** : CHIKUNGUNYA RAPID TEST (IGG/IGM)

**PATIENTID** : XXXXXXXXXXXXXXXXXXXX

| TEST NAME | TECHNOLOGY | RESULT | UNITS |
|---|---|---|---|
| CHIKUNGUNYA - IGG RAPID TEST | IMMUNOASSAY | NEGATIVE | |
| **Method :** LATERAL FLOW IMMUNOASSAY | | | |
| **CHIKUNGUNYA - IGM RAPID TEST** | **IMMUNOASSAY** | **POSITIVE** | |
| **Method :** LATERAL FLOW IMMUNOASSAY | | | |

**Please correlate with clinical conditions.**

**Note :** This is a screening test and a positive report does not confirm diagnosis. All positive cases should be verified by confirmatory methods

**~~ End of report ~~**

Dummy Report

| | |
|---|---|
| **Sample Collected on (SCT)** | : Sample collection time |
| **Sample Received on (SRT)** | : Sample receiving time at Lab |
| **Report Released on (RRT)** | : Report release time |
| **Sample Type** | : SERUM |
| **Labcode** | : |
| **Barcode** | : |

Doctor 1 Sign Doctor 2 Sign