

**Laboratory Investigation Report**

Patient Name	Centre
Age/Gender	OP/IP No/UHID
MaxID/Lab ID	Collection Date/Time
Ref Doctor	Reporting Date/Time

Hematology Special

SIN No: B2B1268457

Test Name	Result	Unit	Bio Ref Interval
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Anti MOG + NMO Panel *

Sample Type	SERUM
Anti NMO (Neuromyelitis Optica) Aquaporin 4	Negative
Anti MOG (Myelin Oligodendrocyte Glycoprotein)	Negative

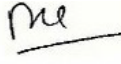
Comment

Note: Test conducted on 1:10 diluted serum or undiluted CSF.

Kindly correlate with clinical findings

***** End Of Report *****

Dr. Poonam. S. Das, M.D.
Principal Director-
Max Lab & Blood Bank Services



Dr. Dilip Kumar M.D.
Associate Director &
Manager Quality



Dr. Nitin Dayal, M.D.
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Test Performed at :910 - Max Hospital - Saket M S S H, Press Enclave Road, Mandir Marg, Saket, New Delhi, Delhi 110017

Booking Centre :2019 - Wellness MRI Center, F-26 Kalkaji New Delhi 110019, 8595204520

The authenticity of the report can be verified by scanning the Q R Code on top of the page

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(CIN No.: U85100DL2021PLC381826)

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Conditions of Reporting: 1. The tests are carried out in the lab with the presumption that the specimen belongs to the patient name as identified in the bill/test request form. 2. The test results relate specifically to the sample received in the lab and are presumed to have been generated and transported per specific instructions given by the physicians/laboratory. 3. The reported results are for the information and interpretation by the referring doctor only. 4. Some tests are referred to other laboratories to provide a wider test menu to the customer. 5. Max Healthcare shall in no event be liable for accidental damages loss, or destruction of specimen which is not attributable to any direct and mala fide act or omission of Max Healthcare or its employees. Liability of Max Healthcare for deficiency of services, or other errors and omissions shall be limited to fee paid by the patient for the relevant laboratory services.