

Medical Form**First Name**

Lunkuse

Last Name

Shamira

Age

25

Gender

Female

Phone Number

0742651737

Address

Ndejje

Next of Kin**Next of Kin
Contact****Date of Visit**

24-Jan-2024

Time of Visit

12:15

**Date of
Discharge**

03-May-2024

**Time of
Discharge**

15:09

**Condition at
Discharge**

Good

Review Date

30-Nov--0001

Review Doctor**Investigations Done:****Test Name:** Urinalysis**Parameter****Result****Normal Range****H/N/L**LEUKOCYTES
(cacells/ul):

Small

NITRITES ():

Negative

—

—

PROTEINS (g/l):

Negative

PH ():

7.5

BLOOD (cacells/l):

Negative

SPECIFIC GRAVITY
():

1.005

KETONES (mmol/l): Negative

BILIRUBIN (umol/l): Negative

MICROSCOPY (): Epithelial cells + seen Pus — —
cells + seen

Released By: Dr. Ronald Ssemanda

Date: 24-Jan-2024

