



Government of Nepal
Ministry of Health and Population
Department of Health Services

National Public Health Laboratory

Pat. ID	:	Requisition Date	:
Patient Name	:		:
Age/Gender	: ...Y/M	Time:	:
Address	:		:
Phone No.	:		:

COVID-19 LAB

Test Name: SARS-CoV-2 (2019-nCoV) Antigen Test

Method: Lateral flow, ICT, Immunogold technique based qualitative detection

Kit name:

Reported Date:

Result	Remarks
Positive/Presumptive Negative	

Name and Signature:

NMC/NHPC no.