



COVID-19 (SARS-CoV-2) RapidPOC

Test Report

Test Number:
 Full Name:
 Date of Birth (MM/DD/YYYY):
 Lot Number:
 Collection Date:
 Collection Time:
 Result Date:
 Result Date:

Test	Test Type	Results
SARS-CoV-2 Rapid POC	Nasal Swab	

This Letter is to Certify that the Above person is has completed a Rapid POC Swab Screen. This test has been authorized for the detection of proteins from SARS-CoV-2 (COVID-19) by Health Canada under Interim Order. For questions or verification, please call Aaron Paramedical at 403-237-7626

Respectfully,


 Dr. John Zubis
 Medical Director



Verify Results



Aaron Paramedical Services

Number: 03D2188271
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 Phone: 403-237-7626

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